Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Hardyal First name  R.  Middle name	First name  Middle name
	Bring your picture identification to your meeting with the trustee.	Jeenarine Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1818	

Del	btor 1 Hardyal R. Jeenar	ine	Case number (if known)		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		675 S. Long Beach Avenue Freeport, NY 11520 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Nassau	Humber, Street, Sity, State & Zii Sode		
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Debt	or 1	Hardyal R. Jeenari	ine				Case number (if known)	
Part	2:	Tell the Court About	our Bank	kruptcy Ca	se			
	Bank	chapter of the cruptcy Code you are sing to file under				each, see <i>Notice Required by</i> age 1 and check the appropria	v 11 U.S.C. § 342(b) for Individuals Filin ate box.	ng for Bankruptcy
	CIIOO	sing to the under	Chap	oter 7				
			☐ Chap	oter 11				
			☐ Chap	oter 12				
			☐ Chap	oter 13				
8.	How	you will pay the fee	ab ord a p	out how you der. If your a pre-printed a	u may pay. Typica attorney is submit address.	ally, if you are paying the fee y ting your payment on your bel	ck with the clerk's office in your local co rourself, you may pay with cash, cashie half, your attorney may pay with a credi	r's check, or money t card or check with
						<b>Iments.</b> If you choose this opti Official Form 103A).	ion, sign and attach the Application for	Individuals to Pay
			bu ap	t is not requ plies to you	uired to, waive you Ir family size and y	ur fee, and may do so only if yo you are unable to pay the fee	on only if you are filing for Chapter 7. By our income is less than 150% of the off in installments). If you choose this optic icial Form 103B) and file it with your pe	icial poverty line that on, you must fill out
9.	Have	you filed for	■ No.					
	bank	ruptcy within the 3 years?	■ No.					
	iast c	years:	□ res.	District		When	Case number	
				District				
				District		When	Case number	
		ny bankruptcy	■ No					
	filed not fi you,	s pending or being by a spouse who is iling this case with or by a business ter, or by an ate?	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your lence?	■ No.	Go to li	ne 12.			
			☐ Yes.	Has you	ur landlord obtaine	ed an eviction judgment again	st you and do you want to stay in your	residence?
					No. Go to line 12			
				_	Yes. Fill out <i>Initia</i> bankruptcy petition		Judgment Against You (Form 101A) a	nd file it with this

Deb	tor 1 Hardyal R. Jeenar	ine		Case number (if known)
Par	Report About Any Bu	sinesses	You Own as a Sole Proprie	etor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bu	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	ate & ZIP Code
	it to this petition.			ox to describe your business:
			☐ Health Care Busi	iness (as defined in 11 U.S.C. § 101(27A))
			_ •	al Estate (as defined in 11 U.S.C. § 101(51B))
				defined in 11 U.S.C. § 101(53A))
			-	er (as defined in 11 U.S.C. § 101(6))
			☐ None of the abov	ve
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	s. If you indicate that you are	e court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under Cha	pter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Pari	t 4: Report if You Own or	Have Any	Hazardous Property or Ar	ny Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and	■ No. □ Yes.	What is the hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
				Number, Street, City, State & Zip Code

Debtor 1 Hardyal R. Jeenarine Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Hardyal R. Jeena	rine		Case	e number (if known)		
Par	t 6: Answer These Quest	ions for R	eporting Purposes				
	What kind of debts do you have?	16a.	Are your debts primarily consindividual primarily for a personal		are defined in 11 U.S.C. § 101(8) as "incurred by a	an	
			□ No. Go to line 16b.				
			Yes. Go to line 17.	Yes. Go to line 17.			
		16b.	Are your debts primarily busing money for a business or investment.		e debts that you incurred to obtain the business or investment.		
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe	that are not consumer debts or	business debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.		you estimate that after any exemable to distribute to unsecured cr	npt property is excluded and administrative expens reditors?	ses	
	administrative expenses are paid that funds will		No				
	be available for distribution to unsecured creditors?		Yes				
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000	<b>2</b> 5,001-50,000		
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	50,001-100,000		
		□ 100-1 □ 200-9		□ 10,001-25,000	☐ More than100,000		
19.	How much do you	□ \$0 - \$	550,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 millio			
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 millio □ \$100,000,001 - \$500 mill			
20.	How much do you	□ \$0 - \$	550,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 millio	_ ` ' ' ' ' '		
		_	001 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	_ : : : : : : : : : : : : : : : : : : :		
		<b>—</b> \$500,	001 - \$1 million				
Par	t 7: Sign Below						
For	you	I have ex	camined this petition, and I declar	e under penalty of perjury that th	ne information provided is true and correct.		
					eligible, under Chapter 7, 11,12, or 13 of title 11, and I choose to proceed under Chapter 7.		
			rney represents me and I did not nt, I have obtained and read the n		tho is not an attorney to help me fill out this 12(b).		
		I request	relief in accordance with the cha	pter of title 11, United States Co	de, specified in this petition.		
		bankrupt and 357	cy case can result in fines up to \$ 1.		money or property by fraud in connection with a o to 20 years, or both. 18 U.S.C. §§ 152, 1341, 151	19,	
		Hardya	Iyal R. Jeenarine I R. Jeenarine e of Debtor 1	Signature o	of Debtor 2	-	
		Executed	October 4, 2016  MM / DD / YYYY	Executed o	MM / DD / YYYY	-	

Debtor 1 Hardyal R. Jeenar	rine	Case number (if known)			
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petition, of under Chapter 7, 11, 12, or 13 of title 11, United States for which the person is eligible. I also certify that I have	Code, and have e	explained the relief available under each chapter		
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, certify the schedules filed with the petition is incorrect.				
, •	/s/ Kenneth Halpern, Esq. Signature of Attorney for Debtor	Date	October 4, 2016 MM / DD / YYYYY		
	Kenneth Halpern, Esq. Printed name				
	Kenneth Halpern, Esq. Firm name				
	666 Old Country Road, Suite 810 Garden City, NY 11530 Number, Street, City, State & ZIP Code				
	Contact phone (516) 222-1199	Email address	kjhalpern@gmail.com		
	Bar number & State				

Fill	in this inform	ation to identify your	case:		ĺ		
Deb	tor 1	Hardyal R. Jeena	rine				
Deh	tor 2	First Name	Middle Name	Last Name			
	ise if, filing)	First Name	Middle Name	Last Name			
Unit	ed States Ban	kruptcy Court for the:	EASTERN DISTRICT (	OF NEW YORK			
Cas (if kno	e number				ı		k if this is an
						amer	nded filing
~"		1000					
		<u>m 106Sum</u>	and Liabilities a	nd Cartain Statistical Informa	tion		40/45
				nd Certain Statistical Informa e are filing together, both are equally respon		supplyi	12/15 ng correct
infor	mation. Fill o	ut all of your schedul	es first; then complete t	the information on this form. If you are filing the box at the top of this page.			
Part	1: Summa	rize Your Assets					
							assets of what you own
1.	Schedule A/ 1a. Copy line	<b>B: Property</b> (Official Fe 55, Total real estate, f	orm 106A/B) rom Schedule A/B			\$	293,600.00
						\$	51,494.00
	1c. Copy line	63, Total of all propert	y on Schedule A/B			\$	345,094.00
Part	2: Summa	rize Your Liabilities					
						Your I	iabilities
						Amour	nt you owe
2.			laims Secured by Propert mn A, Amount of claim, at	y (Official Form 106D) t the bottom of the last page of Part 1 of <i>Sched</i> u	ıle D	\$	598,634.00
3.	Schedule E/F 3a. Copy the	F: Creditors Who Have e total claims from Part	Unsecured Claims (Official 1 (priority unsecured claim	al Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>		\$	0.00
	3b. Copy the	e total claims from Part	2 (nonpriority unsecured	claims) from line 6j of Schedule E/F		\$	106,761.21
					Γ		
				Your total lia	bilities	\$	705,395.21
Dowl	0	V I	I <b>F</b>		L		
Part		rize Your Income and	•				
4.		Your Income (Official Foombined monthly incom		le I		\$	7,775.00
5.	Schedule J:	Your Expenses (Official onthly expenses from li	I Form 106J) ine 22c of <i>Schedule J</i>			\$	8,782.00
Part			Administrative and Sta				
6.	Are you filin	g for bankruptcy und	er Chapters 7, 11, or 13?	?			
	☐ No. You	have nothing to report	on this part of the form. C	Check this box and submit this form to the court	with you	other so	chedules.
7.	<ul><li>Yes</li><li>What kind or</li></ul>	f debt do you have?					
				debts are those "incurred by an individual prima 9g for statistical purposes. 28 U.S.C. § 159.	arily for a	persona	l, family, or
		ebts are not primarily rt with your other sched		ave nothing to report on this part of the form. Ch	neck this i	box and s	submit this form to
Offic	cial Form 1069	•		pilities and Certain Statistical Information			page 1 of 2

Debtor 1 Hardyal R. Jeenarine Case number (if known)

3. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

13,728.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

	tor 1	Hardyal R. Jeen	arine				
	_	First Name	Middle Nar	ne Last Name			
	tor 2 se, if filing)	First Name	Middle Nan	ne Last Name			
Jnit	ed States Bank	ruptcy Court for the:	EASTERN DIS	STRICT OF NEW YORK			
		auptoy Countries and					
Cas	e number						Check if this is ar amended filing
)ff	icial Forr	m 106A/B					
3C	hedule	A/B: Proj	perty				12/15
art		ch Residence, Buildir	<u> </u>	Real Estate You Own or Have ar			
	No. Go to Part 2		olo intoroct in uniy i	ooldonoo, banamg, land, or om	mai proporty.		
_	Yes. Where is the						
.1		Beach Avenue vailable, or other description		What is the property? Check all that  Single-family home  Duplex or multi-unit building  Condominium or cooperative	g	the amount of any sec	claims or exemptions. Put ured claims on Schedule D: laims Secured by Property.
.1				Single-family home  Duplex or multi-unit building	g ve	the amount of any sec Creditors Who Have C	ured claims on Schedule D: laims Secured by Property.
.1		vailable, or other descriptio		Single-family home Duplex or multi-unit building Condominium or cooperativ	g ve	the amount of any sectoreditors Who Have Control Value of the entire property?	ured claims on Schedule D: laims Secured by Property.  Current value of the portion you own?
.1	Street address, if a	vailable, or other descriptio	on	Single-family home Duplex or multi-unit building Condominium or cooperativ  Manufactured or mobile hor Land Investment property	g ve	the amount of any sectoreditors Who Have Co	ured claims on Schedule D: laims Secured by Property.  Current value of the portion you own?
.1	Street address, if a	vailable, or other description	520-0000	Single-family home Duplex or multi-unit building Condominium or cooperativ  Manufactured or mobile hor Land	g ve	Current value of the entire property?  \$293,600.00  Describe the nature of	Current value of the portion you own?  \$293,600.00  Sure of the portion you own?
.1	Street address, if a	vailable, or other description	520-0000 ZIP Code	Single-family home Duplex or multi-unit building Condominium or cooperativ  Manufactured or mobile hor Land Investment property Timeshare	g ve me	Current value of the entire property?  \$293,600.00  Describe the nature of (such as fee simple, to a life estate), if known	Current value of the portion you own?  \$293,600.00  of your ownership interest tenancy by the entireties, or n.
.1	Street address, if a  Freeport  City	vailable, or other description	520-0000 ZIP Code	Single-family home Duplex or multi-unit building Condominium or cooperativ  Manufactured or mobile hor Land Investment property Timeshare Other Who has an interest in the property Debtor 1 only	g ve me	Current value of the entire property? \$293,600.00  Describe the nature of (such as fee simple, to	Current value of the portion you own?  \$293,600.00  of your ownership interest tenancy by the entireties, or n.
.1	Freeport City  Nassau	vailable, or other description	520-0000 ZIP Code	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile hore Land Investment property Timeshare Other Who has an interest in the property Debtor 1 only Debtor 2 only	g ve me erty? Check one	Current value of the entire property?  \$293,600.00  Describe the nature of (such as fee simple, to a life estate), if known	Current value of the portion you own?  \$293,600.00  of your ownership interest tenancy by the entireties, or n.
.1	Street address, if a  Freeport  City	vailable, or other description	520-0000 ZIP Code	Single-family home Duplex or multi-unit building Condominium or cooperativ  Manufactured or mobile hor Land Investment property Timeshare Other Who has an interest in the proper Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	g we me erty? Check one	Current value of the entire property? \$293,600.00  Describe the nature of (such as fee simple, a life estate), if known Fee simple - Deb	Current value of the portion you own?  \$293,600.00  of your ownership interest tenancy by the entireties, or n.
.1	Freeport City  Nassau	vailable, or other description	ZIP Code	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile hore Land Investment property Timeshare Other Who has an interest in the property Debtor 1 only Debtor 2 only	g we me erty? Check one and another	Current value of the entire property? \$293,600.00  Describe the nature of (such as fee simple, if known)  Fee simple - Deb	Current value of the portion you own?  \$\frac{293,600.00}{2}\$  of your ownership interest tenancy by the entireties, or not of the portion you own?
.1	Freeport City  Nassau	vailable, or other description	ZIP Code	Single-family home Duplex or multi-unit building Condominium or cooperativ  Manufactured or mobile hor Land Investment property Timeshare Other  Who has an interest in the proper Debtor 1 only Debtor 2 only At least one of the debtors and	g we me erty? Check one and another	Current value of the entire property? \$293,600.00  Describe the nature of (such as fee simple, if known)  Fee simple - Deb	Current value of the portion you own?  \$\frac{293,600.00}{2}\$  of your ownership interest tenancy by the entireties, or not of the portion you own?

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

	Hardyal R. Jeenarine	Ca	se number (if known)	
Cars, vans	s, trucks, tractors, sport utility ve	hicles, motorcycles		
□ No				
_				
Yes				
3.1 Make:	Suzuki motorcycle	Who has an interest in the property? Check one	Do not deduct secured cla	aims or exemptions. Put
Model:		Debtor 1 only	the amount of any secure Creditors Who Have Clair	
Year:	2013	☐ Debtor 1 only ☐ Debtor 2 only		
	imate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	nformation:	☐ At least one of the debtors and another		
		_	440.000.00	440,000,0
		Check if this is community property (see instructions)	\$12,000.00	\$12,000.0
3.2 Make:	Chevrolet	Who has an interest in the property? Check one	Do not deduct secured cla	
Model:	Camaro	■ Debtor 1 only	the amount of any secure Creditors Who Have Clair	
Year:	2015	Debtor 2 only	Current value of the	, , ,
Approx	timate mileage: 12000	Debtor 1 and Debtor 2 only	entire property?	Current value of the portion you own?
Other in	nformation:	☐ At least one of the debtors and another		
To be	surrendered	Check if this is community property (see instructions)	\$14,406.00	\$14,406.0
3.3 Make:	Chevrolet	Who has an interest in the property? Objective	Do not deduct secured cla	aims or exemptions. Put
	Cilverede	Who has an interest in the property? Check one	the amount of any secure Creditors Who Have Clair	
Model: Year:	2012	■ Debtor 1 only		
	timate mileage: 52,000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
• • •	nformation:	☐ At least one of the debtors and another	,	
To be	surrendered		440.400.00	<b>*</b> 10.100.0
		☐ Check if this is community property (see instructions)	\$19,188.00	\$19,188.0
		nd other recreational vehicles, other vehicles, and other recreational vehicles, other vehicles, and other recreational vehicles, shown objects, and other recreational vehicles, and other vehicles, and other recreational vehicles, other vehicles, and		
■ No				
■ No □ Yes				
☐ Yes  Add the d		on for all of your entries from Part 2, including an	-	\$45.594.00
☐ Yes  5 Add the d		rn for all of your entries from Part 2, including an that number here	-	\$45,594.00
☐ Yes  5 Add the d pages you	u have attached for Part 2. Write	that number here	-	\$45,594.00
☐ Yes  5 Add the d .pages you	u have attached for Part 2. Write ribe Your Personal and Household It	that number here		Current value of the portion you own?
Yes  Add the donages you pages you pages you own  Do you own	u have attached for Part 2. Write ribe Your Personal and Household It	ems terest in any of the following items?		Current value of the portion you own?
Add the dopages you own  Part 3: Description of the page of the pa	u have attached for Part 2. Write ribe Your Personal and Household It or have any legal or equitable in d goods and furnishings : Major appliances, furniture, linens	ems terest in any of the following items?		Current value of the portion you own?
☐ Yes  5 Add the description pages you pages you pages you page page page page page page page page	u have attached for Part 2. Write ribe Your Personal and Household It or have any legal or equitable in d goods and furnishings : Major appliances, furniture, linens	ems terest in any of the following items?		Current value of the portion you own?

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

■ No

D	ebtor 1	Hardyal R. Je	enarine		Case number (if known)	
	☐ Yes.	Describe				
8.	Example  No		gurines; paintings, prints, o ns, memorabilia, collectibles	r other artwork; books, pictures, or other	art objects; stamp, coin,	or baseball card collections;
9.	Example  No	ent for sports and es: Sports, photogi musical instrun Describe	raphic, exercise, and other	hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes a	and kayaks; carpentry tools;
10	Firearm	ns	shotguns, ammunition, and	related equipment		
	■ No	Describe				
11	□ No		hes, furs, leather coats, des	signer wear, shoes, accessories		
			Wearing apparel			\$500.00
12	□ No	bles: Everyday jewo		gement rings, wedding rings, heirloom je	ewelry, watches, gems, g	
			Jewelry and watches			\$300.00
13	Examp  ■ No	rm animals bles: Dogs, cats, bi Describe	rds, horses			
14	■ No	her personal and Give specific infor		not already list, including any health	aids you did not list	
15				Part 3, including any entries for pages	you have attached	\$2,300.00
Pa	art 4: Des	scribe Your Financi	al Assets			
D	o you ow	vn or have any leç	gal or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16	■ No		ave in your wallet, in your ho	ome, in a safe deposit box, and on hand	when you file your petiti	on
17	Deposi Examp	ts of money bles: Checking, sav	rings, or other financial acco	ounts; certificates of deposit; shares in c s with the same institution, list each.	redit unions, brokerage I	nouses, and other similar
	□ No ■ Yes			Institution name:		

D	ebtor 1	Hardyal R. J	eenarin	е	Case number (if known	n)
			17.1.	Checking and savings	Citibank	\$500.00
			17.2.	Checking and savings	Bethpage Federal Credit Union	\$100.00
18	Examp			cly traded stocks ent accounts with broke	erage firms, money market accounts	
	■ No □ Yes			Institution or issuer nar	me:	
19	joint v	ublicly traded st enture	ock and	interests in incorpora	ated and unincorporated businesses, including an intere	est in an LLC, partnership, and
	■ No □ Yes.	Give specific inf		about them me of entity:	% of ownership:	
20	Negoti Non-ne ■ No	iable instruments	include parts are	personal checks, cashie those you cannot trans	able and non-negotiable instruments ers' checks, promissory notes, and money orders. effer to someone by signing or delivering them.	
21	Examp ■ No		accoun	<b>ts</b> SA, Keogh, 401(k), 403	s(b), thrift savings accounts, or other pension or profit-sharin	ig plans
	☐ Yes.	List each accour		tely. of account:	Institution name:	
22	Your s		d deposi	ts you have made so th	nat you may continue service or use from a company blic utilities (electric, gas, water), telecommunications comp	anies, or others
	■ No □ Yes.				Institution name or individual:	
23	_	ies (A contract fo	or a perio	dic payment of money t	to you, either for life or for a number of years)	
	■ No □ Yes	ls	suer nam	ne and description.		
24	26 U.S.	ts in an education			lified ABLE program, or under a qualified state tuition p	orogram.
	■ No □ Yes	ln	stitution i	name and description. S	Separately file the records of any interests.11 U.S.C. § 521(	c):
25	. Trusts. ■ No	, equitable or fu	ture inte	rests in property (othe	er than anything listed in line 1), and rights or powers e	xercisable for your benefit
		Give specific inf	ormation	about them		
26					other intellectual property from royalties and licensing agreements	
	☐ Yes.	Give specific inf	ormation	about them		
27				er general intangibles lusive licenses, coopera	ative association holdings, liquor licenses, professional licer	nses
	☐ Yes.	Give specific inf	ormation	about them		
M	oney or	property owed t	to you?			Current value of the portion you own?  Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

Del	btor 1	Hardyal R. Jeenarine		Case number (if k	nown)
[	□ No	funds owed to you  Give specific information about the	nem, including whether you alread	y filed the returns and the tax years	
			2016 tax refund, if any		\$3,000.00
ı	Examp ■ No	support  ples: Past due or lump sum alimon  Give specific information	ny, spousal support, child support	, maintenance, divorce settlement, pro	operty settlement
ı	Examp ■ No	amounts someone owes you bles: Unpaid wages, disability insubenefits; unpaid loans you n		ts, sick pay, vacation pay, workers' c	ompensation, Social Security
31.	Interes Examp ■ No	ts in insurance policies oles: Health, disability, or life insu		SA); credit, homeowner's, or renter's in	nsurance
[	☐ Yes.	Name the insurance company of Company i		Beneficiary:	Surrender or refund value:
<b>I</b>	If you a some of No □ Yes.	are the beneficiary of a living trustone has died.  Give specific information  against third parties, whether	or not you have filed a lawsuit o		to receive property because
	■ No	oles: Accidents, employment disposeribe each claim	utes, insurance claims, or rights to	) sue	
ı	No	contingent and unliquidated cla	ims of every nature, including o	counterclaims of the debtor and rig	hts to set off claims
ı	No	nancial assets you did not alrea	dy list		
36.			tries from Part 4, including any	entries for pages you have attache	\$3,600.00
Par	t 5: De	scribe Any Business-Related Prope	rty You Own or Have an Interest In.	List any real estate in Part 1.	
•	No. Go	own or have any legal or equitable in to Part 6. So to line 38.	nterest in any business-related prop	perty?	
Par		scribe Any Farm- and Commercial I ou own or have an interest in farmland	Fishing-Related Property You Own o	or Have an Interest In.	
46.	Do you	ı own or have any legal or equi	table interest in any farm- or co	mmercial fishing-related property?	

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No. Go to Part 7.

Debto	Pr 1 Hardyal R. Jeenarine		Case number (if known)	
	Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	o you have other property of any kind you did not already list?  Examples: Season tickets, country club membership			
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$293,600.00
56.	Part 2: Total vehicles, line 5	\$45,594.00	_	
57.	Part 3: Total personal and household items, line 15	\$2,300.00		
58.	Part 4: Total financial assets, line 36	\$3,600.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$51,494.00	Copy personal property total	\$51,494.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$345,094.00

31	I in this inform	ation to identify your case:				Ĭ
De	ebtor 1	Hardyal R. Jeenarine First Name	Middle Name	L	ast Name	
	ebtor 2		4:11 N			
(Sp	oouse if, filing)	First Name M	Middle Name	L	ast Name	
Ur	nited States Ban	kruptcy Court for the: EAST	ERN DISTRICT OF NI	EW Y	ORK	
Ca	ase number					
(if k	known)					Check if this is an
						amended filing
0	fficial For	m 106C				
		C: The Proper	rty You Cla	im	as Exempt	4/16
the nee	property you lis eded, fill out and se number (if kno	ted on Schedule A/B: Property attach to this page as many coown).	(Official Form 106A/B) opies of <i>Part 2: Addition</i>	as yo nal Pa	our source, list the property that you age as necessary. On the top of any	additional pages, write your name and
spe any fun exe	ecific dollar am / applicable sta ids—may be un emption to a pa	ount as exempt. Alternatively tutory limit. Some exemptior limited in dollar amount. Hov	y, you may claim the f ns—such as those for wever, if you claim an	ull fai heal exen	ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu	One way of doing so is to state a ing exempted up to the amount of senefits, and tax-exempt retirement se under a law that limits the t, your exemption would be limited
Pa	rt 1: Identify	the Property You Claim as E	xempt			
1.	Which set of	exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.	
	☐ You are cla	iming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	Vou are cla	iming federal exemptions. 11			- ,,,,	
0			-		fill in the information below	
2.		erty you list on Schedule A/B				
		n of the property and line on nat lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Check only one box for each exemption.			
	2013 Suzuki	motorcycle	Schedule A/B		4	11 U.S.C. § 522(d)(2)
	Line from Scho		\$12,000.00		\$3,675.00	11 0.5.C. § 322(u)(2)
					100% of fair market value, up to any applicable statutory limit	
	Furniture an	nd household furnishings	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(3)
					100% of fair market value, up to any applicable statutory limit	
	Wearing app	parel edule A/B: 11.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
	Line nom con	344,6742. 1111			100% of fair market value, up to any applicable statutory limit	
	Jewelry and	watches edule A/B: 12.1	\$300.00		\$300.00	11 U.S.C. § 522(d)(4)
					100% of fair market value, up to any applicable statutory limit	
		nd savings: Citibank	\$500.00		\$500.00	11 U.S.C. § 522(d)(5)
	Line nom Sche	euule A/D. 11.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

De	btor 1 Hardyal R.	Jeenarine			Case number (if known)		
Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Am	Specific laws that allow exemption			
			Copy the value from Schedule A/B				
	Checking and s	avings: Bethpage	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)	
	Line from Schedule A/B: 17.2			☐ 100% of fair market value, up to any applicable statutory limit			
	2016 tax refund	•	\$3,000.00		\$3,000.00	11 U.S.C. § 522(d)(5)	
	Line nom schedule	ine from <i>Schedule A/B</i> : <b>28.1</b>			100% of fair market value, up to any applicable statutory limit		
3.	(Subject to adjustment No	·	3 years after that for ca	ases fi	led on or after the date of adjustme	,	

Elling this to to more than to the office					
Fill in this information to identify	your case:				
Debtor 1 Hardyal R. Je	eenarine  Middle Name	Last Name			
Debtor 2	Wildlie Haille	Last Name			
(Spouse if, filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for	the: EASTERN DISTRICT OF NEV	W YORK			
Case number				☐ Check	if this is an
				_	led filing
000 : 15 4005					
Official Form 106D					
Schedule D: Credito	rs Who Have Claims	Secured	by Propert	У	12/15
	ole. If two married people are filing togetl Il it out, number the entries, and attach it				
1. Do any creditors have claims secure	d by your property?				
	nit this form to the court with your other	r schedules You	ı have nothing else t	o report on this form	
Yes. Fill in all of the informati	·	r scriculics. Too	Thave nothing clac t	o report on this form.	
Part 1: List All Secured Claims			Column A	Column B	Column C
for each claim. If more than one creditor	nas more than one secured claim, list the cre has a particular claim, list the other creditor betical order according to the creditor's nan	rs in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1 AMERICAN CORADIUS	Describe the property that secures	the claim:	\$0.00	\$293,600.00	\$0.00
Creditor's Name	675 S Long Beach Avenue	Freeport,			
INTERNATIONAL 2420 SWEET HOME RD	NY 11520 Nassau County				
SE 150	As of the date you file, the claim is:	: Check all that			
Buffalo, NY 14228	apply.  Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as car loan)	mortgage or secur	red		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	achanic's lion)			
At least one of the debtors and anoth	_ ` ` `	echanics lien)			
☐ Check if this claim relates to a	Other (including a right to offset)	DUPLICATE	2ND MORTGAGI	E	
community debt	care (more and angle to energy				
Date debt was incurred	Last 4 digits of account num	nber <u>4998</u>			
2.2 CITI MORTGAGE, INC	Describe the property that secures	the claim:	\$277,452.00	\$293,600.00	\$0.00
Creditor's Name	675 S Long Beach Avenue		Ψ211,402.00	Ψ200,000.00	Ψ0.00
BANKRUPTCY SERVICE	NY 11520 Nassau County	,			
CENTER	As of the date you file, the claim is:	: Check all that			
P O BOX 6030 Sioux Falls, SD 57117	apply.	- Ondok all triat			
Number, Street, City, State & Zip Code	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as	mortgage or secur	red		
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, me	echanic's lien)			
At least one of the debtors and anoth	_	Final Bissel			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	First Mortga	ge		
Date debt was incurred	Last 4 digits of account num	15360			

Official Form 106D

Debtor 1 Hardyal R. Jeenarine		Case number (if know)		
First Name Middle N	lame Last Name			
2.2 CITIMORTO A CE	Describe the preparty that accuracy the claim.	<b>¢0.00</b>	¢202 600 00	¢0.00
2.3 CITIMORTGAGE Creditor's Name	Describe the property that secures the claim:	\$0.00	\$293,600.00	\$0.00
C/O DAVIDSON FINK LLP	675 S Long Beach Avenue Freeport, NY 11520 Nassau County			
28 E MAIN STREET				
SUITE 1700	As of the date you file, the claim is: Check all that apply.			
Rochester, NY 14614	□ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or s	secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	☐ Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number DUP	LICATE		
Date dept was incurred	Last 4 digits of account number DOP	LICATE		
OM Et		A 47 470 00	<b>44440000</b>	40.00
2.4 GM Financial Creditor's Name	Describe the property that secures the claim:	\$47,473.00	\$14,406.00	\$0.00
Creditor's Name	2015 Chevrolet Camaro 12000 miles			
	To be surrendered			
P O Box 78143	As of the date you file, the claim is: Check all that			
Phoenix, AZ 85062	apply.  Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
· · · · · · · · · · · · · · · · · · ·	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	■ An agreement you made (such as mortgage or s	secured		
Debtor 2 only	car loan)	oodi od		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	☐ Other (including a right to offset)			
community debt	· · · · · · · · · · · · · · · · · · ·			
Date debt was incurred	Last 4 digits of account number 2292	)		
		<u> </u>		
O. F. MOT Donk	Describe the property that secures the claim:	¢444 700 00	¢202 c00 00	¢0.00
2.5 M&T Bank Creditor's Name	675 S Long Beach Avenue Freeport,	\$111,709.00	\$293,600.00	\$0.00
orealter a Harrie	NY 11520 Nassau County			
	N1 11320 Nassau County			
P O BOX 62182	As of the date you file, the claim is: Check all that			
Baltimore, MD 21264	apply.  ☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	$\square$ An agreement you made (such as mortgage or s	secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)  Second in	nortgage		
community debt				
Date debt was incurred	Last 4 digits of account number 4998	1		
	4990	<u>,                                      </u>		
MANUECTUBERS				
2.6   MANUFCTURERS TRADER TRUST	Describe the property that secures the claim:	\$100,000.00	\$0.00	\$100,000.00

Official Form 106D

Debtor 1 Hardyal R. Jeenarine		Case	number (if know)		
First Name Middle N	lame Last Name	_			
Creditor's Name					
COMPANY					
ONE M&T PLAZA	As of the date you file, the claim is: apply.	Check all that			
NY 14200	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	An agreement you made (such as	mortgage or secured			
☐ Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	SECOND MORT	GAGE		
Date debt was incurred	Last 4 digits of account num	ber			
2.7 MERS FOR CORINTHIAN	Describe the property that secures	the claim:	\$0.00	\$0.00	\$0.00
Creditor's Name					
MORTGAGE CORP					
SOUTHBANC MORTGAGE	As of the date you file, the claim is:	Check all that			
P O BOX 2026	apply.	oncon an inai			
Flint, MI 48501	☐ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	☐ An agreement you made (such as	mortgage or secured			
Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of the debtors and another	Judgment lien from a lawsuit	•			
☐ Check if this claim relates to a	☐ Other (including a right to offset)				
community debt	, ,				
Date debt was incurred	Last 4 digits of account num	ber DUPLICAT	<u>E</u>		
2.8 Santander	Describe the property that secures	the claim:	\$50,000.00	\$19,188.00	\$0.00
Creditor's Name	2012 Chevrolet 350 Diesel 5	2.000	· ,		· · ·
	miles	,			
	To be surrendered				
	As of the date you file, the claim is:	Check all that			
	apply.  Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	An agreement you made (such as	mortgage or secured			
Debtor 2 only	car loan)	<u> </u>			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	,			
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account num	ber			
2.9 Synchrony Bank	Describe the property that secures	the claim:	\$12.000.00	\$12.000.00	\$0.00

Official Form 106D

Debtor 1 Hardyal R. Jeenarine			Case number (if know)	
First Name Middle No.	ame Last Name	_		
Creditor's Name	2013 Suzuki motorcycle			
P O Box 530912 Atlanta, GA 30353	As of the date you file, the claim is: apply.  Contingent	Check all that		
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as car loan)	mortgage or se	cured	
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Loan on m	otorcycle- final payment 7/21	
Date debt was incurred	Last 4 digits of account num	5840		
Add the dollar value of your entries in C	olumn A on this page. Write that nun	nber here:	\$598,634.00	
If this is the last page of your form, add Write that number here:	the dollar value totals from all pages		\$598,634.00	

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in t	his inform	ation to identify your	case:						
Debtor	1	Hardyal R. Jeena							
<b>5</b> 1 <i>i</i>	•	First Name	Middle Na	me	Last Name				
Debtor (Spouse i		First Name	Middle Na	me	Last Name				
				ISTRICT OF NE	EW VORK				
United	States Dati	kruptcy Court for the:	LASTERNO	ISTRICT OF NE	_W TORK				
Case n (if known)								_	theck if this is an mended filing
		106E/F F: Creditors W	/ho Have	Unsecure	d Claims				12/15
any exec Schedule Schedule left. Atta	eutory contra e G: Executo e D: Creditor ch the Conti d case numl	acts or unexpired leases ory Contracts and Unexp	that could resulired Leases (Offured by Propert ge. If you have no	It in a claim. Also icial Form 106G) y. If more space i o information to i	o list executory . Do not include is needed, copy	contracts on any creditors the Part you	Schedule A/B: Pr s with partially se need, fill it out, no	operty (Offici cured claims umber the en	that are listed in tries in the boxes on the
		s have priority unsecure							-
_	No. Go to Pa			, ,					
_ ·		11 2.							
Part 2:		of Your NONPRIORIT	Y Unsecured	Claims					
		s have nonpriority unse							
_	-		_	•					
_		nothing to report in this p	art. Submit this fo	orm to the court wi	th your other sch	nedules.			
	Yes.								
uns	ecured claim n one creditor	nonpriority unsecured cl list the creditor separatel holds a particular claim, l	y for each claim.	For each claim list	ed, identify what	type of claim i	t is. Do not list clair	ms already inc	luded in Part 1. If more
									Total claim
4.1	AMAZON	LCOM		Last 4 digits of a	ccount number	1583			\$3,410.00
		Creditor's Name		Last 4 digits of a	occurr mamber	1303			Ψ5,+10.00
		NY BANK	,	When was the de	ebt incurred?				-
	P O BOX	960013 O, FL 32895							
		eet City State Zlp Code		As of the date yo	u file, the claim	is: Check all t	hat apply		
		ed the debt? Check one.		•	,		,		
	Debtor 1	only		☐ Contingent					
	Debtor 2	only		☐ Unliquidated					
	Debtor 1	and Debtor 2 only		☐ Disputed					
	☐ At least	one of the debtors and an	other	Type of NONPRIC	ORITY unsecure	ed claim:			
	☐ Check if	this claim is for a com	munity	Student loans					
	debt					aration agreen	nent or divorce tha	t you did not	
		subject to offset?		report as priority c					
	■ No						other similar debts		
	☐ Yes			Other. Specify	REVOLVI	IG CREDIT			-

Best Case Bankruptcy

Debtor 1 Hardyal R. Jeenarine		Case number (if know)				
4.2	AT&T MOBILITY	Last 4 digits of account number 8457	\$1,462.00			
	Nonpriority Creditor's Name	When we the debt in some 10				
	P O BOX 537104 Atlanta, GA 30353	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify TELEPHONE SERVICE				
4.3	BANKAMERICARD	Last 4 digits of account number 8036	\$462.00			
	Nonpriority Creditor's Name		·			
	P O BOX 15019	When was the debt incurred?				
	Wilmington, DE 19886  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	As of the date you me, the drain is. Offeck all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	_ `				
		☐ Disputed  Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another	Student loans				
	☐ Check if this claim is for a community debt					
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify REVOLVING CREDIT				
4.4	BJ'S Nonpriority Creditor's Name	Last 4 digits of account number 7119	\$991.00			
	P O BOX 659834	When was the debt incurred?				
	SAN ANTONIO, TX 78265					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify REVOLVING CREDIT				

Debto	1 Hardyal R. Jeenarine		Case number (if know)	
4.5	CAPITAL ONE	Last 4 digits of account number	9492	\$7,840.00
	Nonpriority Creditor's Name P O BOX 70885	When was the debt incurred?		
	Charlotte, NC 28272	when was the debt incurred?		-
	Number Street City State ZIp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	,	2 22 2 2 2 2 2	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify REVOLVING	G CREDIT	-
4.6	CAPITAL ONE	Last 4 digits of account number	7489	\$450.00
	Nonpriority Creditor's Name			<u> </u>
	P O BOX 70885	When was the debt incurred?		-
	Charlotte, NC 28272	As of the date you file, the claim i		
	Number Street City State Zlp Code			
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharin		
	Yes	Other. Specify REVOLVIN	G CREDIT	-
4.7	CAPITAL ONE BANK USA NA	Last 4 digits of account number		\$3,732.66
	Nonpriority Creditor's Name 4851 COX ROAD	When was the debt incurred?		
	Glen Allen, VA 23060	when was the dept incurred:		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.		,	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	<u> </u>	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify JUDGMEN	DOCKETED 8/7/2009	

Debt	tor 1 Hardyal R. Jeenarine	Case number (if know)	
4.8	CAPITAL ONE RETAIL	Last 4 digits of account number 4288	\$3,185.00
	Nonpriority Creditor's Name P O BOX 71106 Charlotte, NC 28272	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	_ ′	·	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify REVOLVING CREDIT	
4.9	FIRST PREMIER BANK	Last 4 digits of account number 0737	\$312.00
	Nonpriority Creditor's Name P O BOX 5529 Sioux Falls, SD 57117	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify REVOLVING CREDIT	
4.1	GE MONEY BANK		\$11,710.52
0	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ11,710.32
	332 MINNESOTA STREET MAIL STOP MSF613D	When was the debt incurred?	
	Saint Paul, MN 55101	_	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify JUDGMENT DOCKETED 11/12/2007	
		- · · · · · · · · · · · · · · · · · · ·	

Debtor 1 Hardyal R. Jeenarine		Case number (if know)					
4.1	GE MONEY BANK/GEMB	Last 4 digits of account number	\$15,000.00				
	Nonpriority Creditor's Name P O BOX 981064 El Paso, TX 79998	When was the debt incurred?					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	□ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	PREVIOUS MOTORCYLE DAMAGED IN STORM  Other. Specify JUDGMENT					
		JODGINENT					
4.1	HOME DEPOT  Nonpriority Creditor's Name	Last 4 digits of account number 3896	\$831.00				
	PROCESSING CENTER Des Moines, IA 50364-0500	When was the debt incurred?					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	$\hfill\Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts					
	□ Yes	■ Other. Specify REVOLVING CREDIT					
4.1	HUDSON AND KEYSE, LLC A/O	Last 4 digits of account number	\$16,998.16				
	Nonpriority Creditor's Name WASHINGTON MUTUAL. BANK 382 BLACKBROOK ROAD	When was the debt incurred?					
	Painesville, OH 44077  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	□Yes	Other Specify JUDGMENT DOCKETED 5/28/2010					

Debtor	1 Hardyal R. Jeenarine	Case number (if know)	
4.1	KOHL'S CREDIT	Last 4 digits of account number 4361	\$307.00
	Nonpriority Creditor's Name P O BOX 3043 Milwaukee, WI 53201	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No	□ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify REVOLVING CREDIT	
4.1 5	LOWE'S	Last 4 digits of account number 6248	\$625.00
	Nonpriority Creditor's Name P O BOX 530914 Atlanta, GA 30353 Number Street City State Zlp Code	When was the debt incurred?  As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.  ■ Debtor 1 only  □ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No □ Yes	□ Debts to pension or profit-sharing plans, and other similar debts  ■ Other. Specify REVOLVING CREDIT	
4.1	MACY'S Nonpriority Creditor's Name 9111 Duke Blvd	Last 4 digits of account number 4938  When was the debt incurred?	\$274.00
	Mason, OH 45040  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No □ Yes	☐ Debts to pension or profit-sharing plans, and other similar debts  ☐ Other. Specify REVOLVING CREDIT	

Debtor	1 Hardyal R. Jeenarine	Case number (if know)	
4.1	MACY'S CREDIT & CONSUMER	Last 4 digits of account number 1818	\$300.00
7	Nonpriority Creditor's Name P O BOX 8113	Last 4 digits of account number 1818  When was the debt incurred?	φ300.00
	Mason, OH 45040		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify REVOLVING CREDIT	
		Other. Specify NET SECTION STREET	
4.1	NY RISING	Last 4 digits of account number 2013	\$25,604.00
	Nonpriority Creditor's Name	When we the debt incorred?	
	500 BI-COUNTY BLVD STE 300	When was the debt incurred?	
	Farmingdale, NY 11735		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	COUTUNACOAU	9000	<b>\$4.400.00</b>
9	SOUTH NASSAU  Nonpriority Creditor's Name	Last 4 digits of account number 8660	\$4,428.00
	COMMUNITIES HOSPITAL P O BOX 5635	When was the debt incurred?	
	Hicksville, NY 11802	- Accepted to the confine the obstacle of the first of the confine	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	По и	
	_	☐ Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other Specific MEDICAL	

Debtor	<sup>1</sup> Hardyal F	R. Jeenarine		Case r	number (if	know)	
4.2	TARGET			2260			¢742.00
0	Nonpriority Cre	ditor's Name	Last 4 digits of account number	2260	1	=	\$743.00
	POBOX 66	60170	When was the debt incurred?				-
	Dallas, TX 7	City State Zlp Code	As of the date you file, the claim	is: Checl	k all that an	vla	
		the debt? Check one.	710 or the date you me, the claim	10. 011001	it all that ap	ייא	
	■ Debtor 1 on		По ::				
	_		☐ Contingent				
	Debtor 2 on		Unliquidated				
	Debtor 1 an	d Debtor 2 only	☐ Disputed				
	☐ At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
		is claim is for a community	☐ Student loans				
	debt Is the claim su	bject to offset?	Obligations arising out of a separeport as priority claims	aration aç	greement o	r divorce that you did not	
	No		Debts to pension or profit-sharing	ng plans,	and other s	similar debts	
	Yes		■ Other. Specify REVOLVIN	IG CRE	DIT		-
4.2	WELLS FAI	RGO FINANCIAL BNK	Last 4 digits of account number				\$8.095.87
1		H 4TH AVENUE	When was the debt incurred?			-	
	Sioux Falls Number Street	, SD 57104 City State Zlp Code	As of the date you file, the claim	is: Checl	k all that ap	vla	
		the debt? Check one.	,			r·7	
	Debtor 1 on	ly	☐ Contingent				
	Debtor 2 on	ly	☐ Unliquidated				
	Debtor 1 an	d Debtor 2 only	□ Disputed				
	_	of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	_	is claim is for a community	☐ Student loans				
	debt	is claim is for a community	☐ Obligations arising out of a sep	aration ag	greement o	r divorce that you did not	
		bject to offset?	report as priority claims			·	
	No		☐ Debts to pension or profit-shari				
	☐ Yes		Other. Specify JUDGMEN	T DOC	KETED '	11/18/2007	-
Dord O	11:-1 01:	- (- D- Nette d'Alessa - Dele	That Var Almada Data				
Part 3:		s to Be Notified About a Deb	· ·				
is tryi have	ing to collect from more than one of the debts	m you for a debt you owe to son creditor for any of the debts that in Parts 1 or 2, do not fill out or		n Parts 1	or 2, then	list the collection agenc	y here. Similarly, if you
Part 4:		mounts for Each Type of Uns					
	the amounts of of unsecured cla		s. This information is for statistical	reporting	j purposes	only. 28 U.S.C. §159. Ad	d the amounts for each
						Total Claim	
	6a.	Domestic support obligations		6a.	\$	0.00	
	Total						_
from F	laims Part 1 6b.	Taxes and certain other debts	you owe the government	6b.	\$	0.00	
	6c.		jury while you were intoxicated	6c.	\$	0.00	_
	6d.	Other. Add all other priority unse	cured claims. Write that amount here.	6d.	\$	0.00	_
							_
	6e.	Total Priority. Add lines 6a throu	igh 6d.	6e.	\$	0.00	_
						T. (10)	
	6f.	Student loans		6f.	\$	Total Claim 0.00	
	Total				*	0.00	-
cl from F	laims Part 2 6g.	Obligations arising out of a sec	paration agreement or divorce that				
5 1		you did not report as priority c	laims	6g.	\$	0.00	_
	6h.	Debts to pension or profit-shar	ing plans, and other similar debts	6h.	\$	0.00	

Debtor 1	Hardyal F	R. Jeenarine	Case n	umber (if know)		
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	106,761.21	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	106,761.21	

Fill in this infor	rmation to identify your	case:		
Debtor 1	Hardyal R. Jeena	rine		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK	
Case number				
(if known)				☐ Check if this is amended filing

# Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

		Name, Number	, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5	-				
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

Official Form 106G

Debtor 1					
	Hardyal R. Jeena First Name	rine  Middle Name	Last Name		
Debtor 2					
(Spouse if, fill	ng) First Name	Middle Name	Last Name	_	
United Sta	ates Bankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK		
Case num (if known)	ber				☐ Check if this is an
	I Form 106H	obtoro			amended filing
scned	lule H: Your Cod	eptors			12/15
	hin the last 8 years, have you	ı lived in a community pr	onerty state or territo		and the second to wide the Sector In
No Yes	Go to line 3.  S. Did your spouse, former spouse, former spouse, former spouse, former spouse, former spouse, former spouse, for the spouse spouse, for the spouse spouse, for the spouse, for	ors. Do not include your f that person is a guaran	e with you at the time?  spouse as a codebto tor or cosigner. Make	r if your spouse is filing sure you have listed the	
No Yes	Go to line 3.  S. Did your spouse, former spouse, former spouse, former spouse, former spouse, former spouse, former spouse, for the spouse spouse, for the spouse spouse, for the spouse, for	use, or legal equivalent live ors. Do not include your f that person is a guaran	e with you at the time?  spouse as a codebto tor or cosigner. Make	r if your spouse is filing sure you have listed the OGG). Use Schedule D,	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
No Yes	Go to line 3.  s. Did your spouse, former spouse, f	use, or legal equivalent live fors. Do not include your f that person is a guaran I Form 106E/F), or Sched	e with you at the time?  spouse as a codebto tor or cosigner. Make	r if your spouse is filing sure you have listed the OGG). Use Schedule D,	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil editor to whom you owe the debt
No Yes	Go to line 3.  S. Did your spouse, former spoulumn 1, list all of your codebte 2 again as a codebtor only in 106D), Schedule E/F (Official column 2.  **Column 1: Your codebtor**	use, or legal equivalent live fors. Do not include your f that person is a guaran I Form 106E/F), or Sched	e with you at the time?  spouse as a codebto tor or cosigner. Make	r if your spouse is filing sure you have listed the office of the column 2: The creation of the	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil editor to whom you owe the debt es that apply:
No Yes	Go to line 3.  S. Did your spouse, former spoulumn 1, list all of your codebte 2 again as a codebtor only in 106D), Schedule E/F (Official column 2.  **Column 1: Your codebtor**	use, or legal equivalent live fors. Do not include your f that person is a guaran I Form 106E/F), or Sched	e with you at the time?  spouse as a codebto tor or cosigner. Make	r if your spouse is filinguage sure you have listed the sure you have listed the sure you have listed the schedule D, and a schedule D, and a schedule D, and a schedule D, linguage sure in the sched	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil editor to whom you owe the debt es that apply:
No Yes	Go to line 3.  S. Did your spouse, former spouse, former spouse, former spouse, former spouse, former spouse, and a spouse 2 again as a codebtor only in 106D), Schedule E/F (Official olumn 2.  **Column 1: Your codebtor** Name, Number, Street, City, State and Z	use, or legal equivalent live fors. Do not include your f that person is a guaran I Form 106E/F), or Sched	e with you at the time?  spouse as a codebto tor or cosigner. Make	r if your spouse is filinguage sure you have listed the sure you have listed to have listed to have you have listed to have you have listed to have listed the have	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil editor to whom you owe the debtes that apply:  e ine
No Yes	Go to line 3.  S. Did your spouse, former spoulumn 1, list all of your codebte 2 again as a codebtor only in 106D), Schedule E/F (Official olumn 2.  **Column 1: Your codebtor** Name, Number, Street, City, State and Z.  **Name**	use, or legal equivalent live fors. Do not include your f that person is a guaran I Form 106E/F), or Sched	e with you at the time?  spouse as a codebto tor or cosigner. Make	r if your spouse is filinguage sure you have listed the sure you have listed the sure you have listed the schedule D, and a schedule D, and a schedule D, and a schedule D, linguage sure in the sched	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil editor to whom you owe the debtes that apply:  e ine
No Yes	Go to line 3.  S. Did your spouse, former spouse, former spouse, former spouse, former spouse, former spouse, and a spouse 2 again as a codebtor only in 106D), Schedule E/F (Official olumn 2.  **Column 1: Your codebtor** Name, Number, Street, City, State and Z	use, or legal equivalent live fors. Do not include your f that person is a guaran I Form 106E/F), or Sched	e with you at the time?  spouse as a codebto tor or cosigner. Make	r if your spouse is filinguage sure you have listed the sure you have listed to have listed to have you have listed to have you have listed to have listed the have	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil editor to whom you owe the debtes that apply:  e ine
3. In Co in line Form out C	Go to line 3.  S. Did your spouse, former spoulumn 1, list all of your codebits 2 again as a codebtor only in 106D), Schedule E/F (Official column 2.  **Column 1: Your codebtor** Name, Number, Street, City, State and Z	use, or legal equivalent live fors. Do not include your f that person is a guaran Form 106E/F), or Sched	e with you at the time?  spouse as a codebto tor or cosigner. Make ule G (Official Form 1	r if your spouse is filing sure you have listed the office of the control of the	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil editor to whom you owe the debt es that apply:  e ine e
No Yes	Go to line 3.  S. Did your spouse, former spoulumn 1, list all of your codebits 2 again as a codebtor only in 106D), Schedule E/F (Official column 2.  **Column 1: Your codebtor** Name, Number, Street, City, State and Z	use, or legal equivalent live fors. Do not include your f that person is a guaran Form 106E/F), or Sched	e with you at the time?  spouse as a codebto tor or cosigner. Make ule G (Official Form 1	r if your spouse is filinguage you have listed to the sure you have listed to have you have you have listed to have you have you have listed to have you have you have you have listed to have you have you have listed to have you	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil editor to whom you owe the debt es that apply:  e ine e
3. In Co in line Form out C	Go to line 3.  S. Did your spouse, former spoulumn 1, list all of your codebte 2 again as a codebtor only in 106D), Schedule E/F (Official olumn 2.  **Column 1: Your codebtor** Name, Number, Street, City, State and Z.  Name  **Number** Street** City**	use, or legal equivalent live fors. Do not include your f that person is a guaran Form 106E/F), or Sched	e with you at the time?  spouse as a codebto tor or cosigner. Make ule G (Official Form 1	r if your spouse is filinguage you have listed the sure you have listed to have you have listed to have you have listed to have listed to have you have listed to have listed to have you have listed to have listed the have listed to have listed to have listed the have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil editor to whom you owe the debt as that apply:  e ine e e ine
3. In Co in line Form out C	Go to line 3.  S. Did your spouse, former spoulumn 1, list all of your codebte 2 again as a codebtor only in 106D), Schedule E/F (Official olumn 2.  **Column 1: Your codebtor** Name, Number, Street, City, State and Z.  Name  **Number** Street** City**	use, or legal equivalent live fors. Do not include your f that person is a guaran Form 106E/F), or Sched	e with you at the time?  spouse as a codebto tor or cosigner. Make ule G (Official Form 1	r if your spouse is filinguage you have listed to the sure you have listed to have you have you have listed to have you have you have listed to have you have you have you have listed to have you have you have listed to have you	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil editor to whom you owe the debt es that apply:  e ine e e ine

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Fill	in this information t	to identify your ca	950·					ĺ				
	otor 1	Hardyal R. J										
	otor 2 ouse, if filing)						_					
Uni	ted States Bankrup	otcy Court for the	EASTERN DISTRICT	OF NEV	V YORK							
	se number			-						nt show	ving postpetition following date:	
0	fficial Form	106I						Ī	/IM / DD/ Y	YYY		
S	chedule I:	Your Inco	ome									12/15
sup spo atta	plying correct info use. If you are sep ch a separate she tt 1: Describ	ormation. If you parated and you et to this form. (	sible. If two married peo are married and not filin r spouse is not filing wi On the top of any additi	ng jointl ith you,	y, and your s do not includ	pouse de infor	is liv mati	ing with on abou	you, inclu t your spo	ıde info use. If ı	rmation about more space is	your needed,
1.	Fill in your empl information.	loyment		Debto	or 1				Debtor 2	or non	-filing spouse	
	If you have more attach a separate information about	page with	Employment status		nployed t employed				■ Emplo	-	I	
	employers.		Occupation	Print	er				Assista	nt Sup	ervisor	
	Include part-time, self-employed wo		Employer's name	мтм	Printing				Mill Nec	k Serv	rices, Inc.	
	Occupation may or homemaker, if		Employer's address	Colle	ge Point, N	Υ			Hicksvil	lle, NY		
			How long employed t	here?	25 years	S			_2	years		
<b>Esti</b> spou	mate monthly incurse unless you are	separated. spouse have mo	ate you file this form. If		-		•					-
		.,						For De	btor 1		ebtor 2 or illing spouse	
2.			ry, and commissions (be calculate what the monthle			2.	\$	6	,691.00	\$	4,477.00	
3.	Estimate and lis	t monthly overti	me pay.			3.	+\$		0.00	+\$_	0.00	
4.	Calculate gross	Income. Add lin	e 2 + line 3.			4.	\$	6,6	91.00	\$	4,477.00	

Official Form 106I Schedule I: Your Income page 1

Debt	tor 1	Hardyal R. Jeenarine	_	С	ase number (if kn	own)			
					For Debtor 1		For	Debtor 2 or	
								-filing spouse	
	Cop	y line 4 here	4.		\$ 6,691	.00	\$	4,477.00	
5.	l iet	all payroll deductions:							
J.		• •	Fo		¢ 4.000		¢.	4 007 00	
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$1,663 \$0		\$_	1,037.00	_
	5b. 5c.	Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5b. 5c.			.00	\$ \$	0.00	
	5d.	Required repayments of retirement fund loans	5d.		:	.00	\$ 	0.00	_
	5u. 5e.	Insurance	5u. 5e.		·	.00	э \$	0.00 685.00	
	5e. 5f.	Domestic support obligations	5e. 5f.		: <del></del>	.00	э \$		_
		Union dues			·	.00	\$ 	0.00	_
	5g. 5h.		5g. 5h.		·	.00		0.00	_
	-	Other deductions. Specify:	_		·	.00		0.00	_
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ 1,671		\$	1,722.00	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	;	\$ 5,020	.00	\$	2,755.00	_
8.		all other income regularly received:							
	8a.	Net income from rental property and from operating a business, profession, or farm							
		Attach a statement for each property and business showing gross							
		receipts, ordinary and necessary business expenses, and the total							
		monthly net income.	8a.		\$ 0	.00	\$	0.00	
	8b.	Interest and dividends	8b.		\$ 0	.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent							
		regularly receive Include alimony, spousal support, child support, maintenance, divorce							
		settlement, and property settlement.	8c.		\$ 0	.00	\$	0.00	
	8d.	Unemployment compensation	8d.		·	.00	\$_	0.00	_
	8e.	Social Security	8e.			.00	\$	0.00	_
	8f.	Other government assistance that you regularly receive			Ť			0.00	-
		Include cash assistance and the value (if known) of any non-cash assistance							
		that you receive, such as food stamps (benefits under the Supplemental							
		Nutrition Assistance Program) or housing subsidies.	01		Φ		Φ.		
	0	Specify:	_ 8f.			.00	\$	0.00	_
	8g.	Pension or retirement income	8g.			.00	\$	0.00	_
	8h.	Other monthly income. Specify:	_ 8h.	.+	\$0	.00	+ \$	0.00	- -
9.	Δdd	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		.00	\$	0.0	0
٥.	Auc	Tall other moonie. Add lines our obtoer our octorrogram.	٥.	L		.00	L <sup>*</sup>	0.0	
			Г.	_	1				
10.			10.   8	\$_	5,020.00	+ \$_	2,7	755.00 = \$	7,775.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L						
11.		te all other regular contributions to the expenses that you list in Schedule							
		ude contributions from an unmarried partner, members of your household, your	depe	nde	ents, your room	mates	, and		
		er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	avoilo	hla	to now ownone	aa liat	مانم د	Cohodulo I	
	Spe	· · · · · · · · · · · · · · · · · · ·	avalla	IDIE	to pay expense	55 IISU	su III c	11. <b>+</b> \$	0.00
	Оро						—		0.00
12.	Add	I the amount in the last column of line 10 to the amount in line 11. The res	ult is	the	combined mon	thly in	icome.	.	
		e that amount on the Summary of Schedules and Statistical Summary of Certain							<b></b> 00
	app	lies						12.   \$	7,775.00
								Combi	ned
									ly income
13.	Do	you expect an increase or decrease within the year after you file this form	?						-
		No.							
	П	Yes. Explain:					-		

Official Form 106I Schedule I: Your Income page 2

	in this informs	diana ka inlandik							
FIII	in this informa	ition to identify yo	ur case:						
Deb	tor 1	Hardyal R. Je	eenarine		Check if this is:				
								ended filing	
	otor 2 ouse, if filing)								wing postpetition chapter the following date:
(Spt	ouse, ii iiiiig)						13 exp	elises as ul	the following date.
Unit	ed States Bankr	ruptcy Court for the:	EASTE		MM / D	D / YYYY			
Cas	e number								
(If kı	nown)								
Of	fficial Fo	rm 106J							
		J: Your I	Exper	nses					12/1:
Be info	as complete a	and accurate as	possible eded, atta	. If two married people ar ch another sheet to this					
Par 1.	t 1: Descr Is this a joir	ribe Your House	hold						
١.									
	■ No. Go to								
	_	es Debtor 2 live i	n a separ	ate nousenoid?					
	□ N □ Y		t file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	hold of De	ebtor 2.		
2.	Do you have	e dependents?	□ No						
	Do not list Do Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Der age	endent's	Does dependent live with you?
	Do not state	the							□ No
	dependents				Daughter		14	years	■ Yes
								<u> </u>	□ No
					Daughter		19	years	■ Yes
									□ No
									☐ Yes
									□ No
									☐ Yes
3.	expenses of	oenses include f people other th d your depender	nan ┌	No Yes					
Par	t 2: Estim	ate Your Ongoir	na Monthi	v Expenses					
Est exp	imate your ex	cpenses as of yo	our bankr	uptcy filing date unless y y is filed. If this is a supp					
				government assistance i					
	ficial Form 10							Your exp	enses
4.		or home owners	nclude first mortgage	e 4.	\$		2,870.00		
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a.	\$		0.00
	4b. Prope	rty, homeowner's	s, or renter	's insurance		4b.	\$		0.00
			•	ıpkeep expenses		4c.	· · —		200.00
_		owner's associat				4d.			0.00
5.	Additional r	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$		410.00

Debtor 1 Hardyal F	2. Jeenarine	Case num	ber (if known)	
6. Utilities:				
	neat, natural gas	6a.	\$	400.00
•	er, garbage collection	6b.		25.00
	cell phone, Internet, satellite, and cable services	6c.	\$	250.00
6d. Other. Spe		6d.	·	0.00
•	keeping supplies	7.	·	700.00
	nildren's education costs	8.	\$	0.00
	y, and dry cleaning	9.	\$	175.00
	oducts and services	10.	\$	
		10.	\$	200.00
	•	11.	Φ	50.00
Do not include ca	nclude gas, maintenance, bus or train fare.	12.	\$	475.00
	lubs, recreation, newspapers, magazines, and books	13.		100.00
	butions and religious donations	14.		0.00
5. Insurance.	buttons and rengious donations	14.	Ψ	0.00
	surance deducted from your pay or included in lines 4 or 20.			
15a. Life insurar		15a.	\$	0.00
15b. Health insu		15b.		0.00
15c. Vehicle ins		15c.	·	0.00
15d. Other insur		15d.	·	
	• • •		Ψ	0.00
<ol> <li>I axes. Do not inc Specify:</li> </ol>	lude taxes deducted from your pay or included in lines 4 or 20	). 16.	\$	0.00
7. Installment or le	aco naumonte:		Ψ	0.00
17a. Car payme		17a.	\$	630.00
17b. Car payme		17a. 17b.	·	
			·	675.00
	cify: Suzuki motorcycle	17c.	·	256.00
17d. Other. Spe	•	17d.	\$	0.00
	of alimony, maintenance, and support that you did not repout pay on line 5, Schedule I, Your Income (Official Form		\$	0.00
	you make to support others who do not live with you.	1001).	\$	350.00
	redit card payments	19.	Ψ	330.00
	rty expenses not included in lines 4 or 5 of this form or o		our Incomo	
20a. Mortgages		20a.		0.00
20b. Real estate		20b.		0.00
	omeowner's, or renter's insurance	20c.		0.00
	·		·	
	e, repair, and upkeep expenses	20d.	·	0.00
	r's association or condominium dues	20e.	·	0.00
<ol> <li>Other: Specify:</li> </ol>	College tuition for step-daughter (paid by wife)	21.	+\$	1,016.00
2. Calculate your m	onthly expenses			
22a. Add lines 4 t	• •		\$	8.782.00
	(monthly expenses for Debtor 2), if any, from Official Form 10	)6J-2	\$	3,102.00
		,	I :	0.700.00
∠∠c. Add line 22a	and 22b. The result is your monthly expenses.		\$	8,782.00
3. Calculate your m	onthly net income.		L	
•	2 (your combined monthly income) from Schedule I.	23a.	\$	7,775.00
	monthly expenses from line 22c above.	23b.		8,782.00
	, , ,	_3		
23c. Subtract vo	ur monthly expenses from your monthly income.		1.	,
	s your monthly net income.	23c.	\$	-1,007.00
	n increase or decrease in your expenses within the year a			
	expect to finish paying for your car loan within the year or do you exp	ect your mortgage	payment to increas	se or decrease because of a
	erms of your mortgage?			
■ No.				
☐ Yes.	Explain here:			

Fill in this	s information to identify you	ır case:		
Debtor 1	Hardyal R. Jeer			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name	
United Sta	ates Bankruptcy Court for the	EASTERN DISTRICT (	OF NEW YORK	
Case num	nber			
(if known)				☐ Check if this is an amended filing
If two mar You must obtaining	rried people are filing togeth	er, both are equally responding the sankruptcy schedule in connection with a ban		
	Sign Below			
Did	you pay or agree to pay sor	neone who is NOT an atto	rney to help you fill out bankr	uptcy forms?
	No			
	Yes. Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	er penalty of perjury, I decla they are true and correct.	e that I have read the sun	nmary and schedules filed wit	n this declaration and
x /	s/ Hardyal R. Jeenarine		X	
Ŧ	Hardyal R. Jeenarine Signature of Debtor 1		Signature of Debte	or 2
[	October 4, 2016		Date	

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

Fill	in this inforr	nation to identify your	case:			
Deb	tor 1	Hardyal R. Jeena	arine			
D. I	10	First Name	Middle Name	Last Name		
Unit	ed States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK		
	_					hande William to a co
(II KN	own)					
<b>○</b> f	ficial Ec	rm 107				
			Affairs for Indivi	duals Filing for B	ankruptcy	4/16
infoi num	mation. If m	nore space is needed, n). Answer every ques	attach a separate sheet to	this form. On the top of any		
1.		r current marital statu		a Livea Belole		
	_	· ourroin mariar otata	<b>.</b>			
	■ Married □ Not ma	ried				
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	at all of the places you li	ved in the last 3 years. Do n	ot include where you live now	<b>'</b> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	■ No					
	☐ Yes. Ma	ake sure you fill out <i>Sch</i>	edule H: Your Codebtors (C	Official Form 106H).		
Par	Expla	n the Sources of You	Income			
4.	Fill in the total	al amount of income you	received from all jobs and	ng a business during this ye all businesses, including part- re together, list it only once ur		dar years?
	□ No ■ Yes Fil	in the details.				
	100.11	in the dotallo.	Debterd		Daletano	
			Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$65,000.00	■ Wages, commissions, bonuses, tips	\$37,500.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

Deb	otor 1	Hai	dyal R. Je	enarine					Case	numbe	r (if known)				
					Debtor 1					Debto	or 2				
					Sources of Check all t		(be	oss income efore deducti clusions)	ons and	Source	ces of inc		(b	ross inco efore dec nd exclusi	ductions
	(January 1 to December 31, 2015)		■ Wages bonuses, t	commissions,			\$0.00		ages, cor ses, tips	nmissions			\$0.00		
					☐ Operati	ng a business				□ Op	erating a	business			
For (Jar	the o	calend / 1 to I	ar year bef December 3	ore that: 31, 2014 )	■ Wages bonuses, t	, commissions, ips			\$0.00		ages, cor ses, tips	nmissions			\$0.00
					☐ Operati	ng a business				□ Op	erating a	business			
	and winn	other pings. If each s	oublic benefi you are filir	it payments; ng a joint cas ne gross inco	pensions; re se and you h	ne is taxable. Exantal income; inter ave income that y	rest; di you red	lividends; mo ceived togetl	ney collectoner, list it or	ed from nly once	lawsuits under D	; royalties; ebtor 1.			
					Debtor 1					Debto	or 2				
					Sources o Describe b		eac (be	oss income ch source efore deducti clusions)			ces of inc ibe below		(b	ross inco efore dec nd exclusi	ductions
Par	t 3:	List	Certain Pay	yments You	Made Before	re You Filed for	Bankr	ruptcy							
6.	Are ←	No.	Neither De individual p During the Individual P No. Individual P Yes  * Subject to Debtor 1 o	position 1 nor Description 1 nor Description 2 nor Description 3 nor Description 2 nor Description 3 n	Debtor 2 has a personal, far personal, far personal, far personal, far personal, far personal	marily consumer primarily consumily, or household for bankruptcy, did to whom you paid include paymer an attorney for thand every 3 years primarily consumor bankruptcy, did to whom you paid to whom you paid mestic support o	d you  id a tot his bar s after umer c d you	debts. Consipose."  pay any creatal of \$6,425 domestic sunkruptcy case that for case debts.  pay any creatal of \$600 o	ditor a total  * or more ir pport obliga e. es filed on o ditor a total r more and	of \$6,4.	25* or more pasuch as cothe date of or more	ore?  yments an hild suppo of adjustm ?	d the to rt and al ent.	tal amoui limony. A ditor. Do i	nt you Ilso, do
					this bankrup		Jiiyaili	ons, such as	σιιία σαρρ	or and	amnony.	, 1130, UO II	ot moidt	ao payine	ino io all
	Cre	ditor's	Name and	Address		Dates of payme	ent	Total a	mount paid		int you till owe	Was th	is paym	ent for .	

Del	ebtor 1 Hardyal R. Jeenarine		Cas	se number (if known)		
7.	Within 1 year before you filed for bankrup Insiders include your relatives; any general pound of which you are an officer, director, person a business you operate as a sole proprietor. alimony.	partners; relatives of any gen in control, or owner of 20% o	eral partners; partners r more of their voting	erships of which yog g securities; and a	ou are a general ny managing ag	partner; corporation ent, including one fo
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider.</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the	nis payment
8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		ments or transfer a	any property on a	ccount of a del	ot that benefited an
	<ul><li>No</li><li>Yes. List all payments to an insider</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credite	
Par	rt 4: Identify Legal Actions, Repossessi	one and Foreclosures	Para		o.uuo oroun	0.0.1.00
Га						
9.	Within 1 year before you filed for bankrup List all such matters, including personal injurt modifications, and contract disputes.					
	□ No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	case
	Citimortgage, Inc. v. Hardyal Jeenarine et al	Summons and Notice of foreclosure	State of New York/Supreme/ Nass	County of	■ Pending □ On appea □ Concluded	
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details bel	otcy, was any of your prope	erty repossessed, f	oreclosed, garnis	shed, attached,	seized, or levied?
	<ul><li>No. Go to line 11.</li><li>Yes. Fill in the information below.</li></ul>					
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	d			ргоренту
11.	Within 90 days before you filed for bankry accounts or refuse to make a payment be No  Yes. Fill in the details.		luding a bank or fir	nancial institutior	n, set off any an	nounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or  ■ No □ Yes		erty in the possess	ion of an assigne	e for the benef	it of creditors, a

Official Form 107

Del	otor 1 Hardyal R. Jeenarine	Case number	(if known)	
Pai	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptcy ■ No □ Yes. Fill in the details for each gift.	r, did you give any gifts with a total value of more	than \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	■ No	, did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or contrib	ution.		
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Pai	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptcy or gambling?  No Yes. Fill in the details.	or since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,
	Describe the property you lost and Describe	cribe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred Inclu	de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	loss	lost
Pai	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or prepa	did you or anyone else acting on your behalf pay ring a bankruptcy petition? ers, or credit counseling agencies for services require		rty to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid	Description and value of any property	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not You	transferred	or transfer was	payment
	Kenneth Halpern, Esq 666 Old Country Road Suite 810 Garden City, NY 11530 kjhalpern@gmail.com	Legal fee - \$2,200	6/23/16	\$1,500.00
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you li		or transfer any prope	rty to anyone who
	■ No			
	Yes. Fill in the details.			
	Person Who Was Paid	Description and value of any property	Date payment	Amount of
	Address	transferred	or transfer was	payment

Debtor 1 Hardyal R. Jeenarine

Case number (if known)

18.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your but Include both outright transfers and transfers ma	usiness or financial affa	nirs?		
	include gifts and transfers that you have alread  No			culty interest of mortgage on you	гргорену). Бо пос
	Yes. Fill in the details.				
	Person Who Received Transfer Address	Description and v property transferr		Describe any property or payments received or debts paid in exchange	Date transfer was made
	Person's relationship to you				
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro  No  Yes. Fill in the details.		y property to a se	elf-settled trust or similar device	of which you are a
	Name of trust	Description and v	alue of the prope	rty transferred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposit	Boxes, and Stora	age Units	
20.	Within 1 year before you filed for bankruptc sold, moved, or transferred?	•			
	Include checking, savings, money market, o houses, pension funds, cooperatives, associated No			r deposit; snares in banks, credi	t unions, brokerage
	Yes. Fill in the details.				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	t or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables?	year before you filed for	bankruptcy, any	safe deposit box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?
22.	Have you stored property in a storage unit of	or place other than your	home within 1 ye	ear before you filed for bankrupt	cy?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		escribe the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control	for Someone Else			
23.	Do you hold or control any property that sol for someone.	meone else owns? Inclu	ude any property	you borrowed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		escribe the property	Value
Par	t 10: Give Details About Environmental Info	ormation			
_		_			

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5 Debtor 1 Hardyal R. Jeenarine

Case number (if known)

		c substances, wastes, or material into t ulations controlling the cleanup of these			ndwa	ter, or other medium, including sta	itutes or
		means any location, facility, or propert wn, operate, or utilize it, including disp	-		l law,	, whether you now own, operate, o	r utilize it or used
		<i>ardous material</i> means anything an env ardous material, pollutant, contaminant			ıs wa	ste, hazardous substance, toxic s	ubstance,
Rep	ort a	II notices, releases, and proceedings th	at yo	u know about, regardless of who	en the	ey occurred.	
24.	Has	any governmental unit notified you tha	t you	may be liable or potentially liab	le und	der or in violation of an environme	ntal law?
	■ No □ Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice
25.	Hav	re you notified any governmental unit of	any	release of hazardous material?			
		No Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State a ZIP Code)	ınd	Environmental law, if you know it	Date of notice
26.	Hav	re you been a party in any judicial or adr	minis	trative proceeding under any en	viron	mental law? Include settlements a	nd orders.
		No Yes. Fill in the details.					
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case
Par	t 11:	Give Details About Your Business or	Coni	nections to Any Business			
27.	Wit	hin 4 years before you filed for bankrup	tcy, d	lid you own a business or have a	any of	f the following connections to any	business?
		☐ A sole proprietor or self-employed i	in a tı	rade, profession, or other activity	y, eith	ner full-time or part-time	
		☐ A member of a limited liability comp	oany	(LLC) or limited liability partners	hip (l	LLP)	
		☐ A partner in a partnership					
		☐ An officer, director, or managing ex	ecuti	ive of a corporation			
		☐ An owner of at least 5% of the votin	g or	equity securities of a corporation	n		
		No. None of the above applies. Go to l	Part 1	12.			
		Yes. Check all that apply above and fill	l in th	ne details below for each busines	ss.		
		siness Name	Des	scribe the nature of the business	3	Employer Identification number	
		dress mber, Street, City, State and ZIP Code)	Naı	ne of accountant or bookkeeper		Do not include Social Security r  Dates business existed	number or ITIN.
28.		hin 2 years before you filed for bankrup itutions, creditors, or other parties.	tcy, d	lid you give a financial statemen	t to a	nyone about your business? Inclu	de all financial
		No					
		Yes. Fill in the details below.					
		me dress mber, Street, City, State and ZIP Code)	Dat	e Issued			

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Debtor 1 Hardyal R.	Jeenarine		Case number (if known)
			perty, or obtaining money or property by fraud in connection
	•	\$250,000, or imprisonment for <b>u</b>	ıp to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1	519, and 3571.		
/s/ Hardyal R. Jeenar	ine		
Hardyal R. Jeenarine		Signature of Debtor 2	
Signature of Debtor 1			
Date October 4, 20	16	Date	
Did you attach additiona	I pages to Your Stateme	ent of Financial Affairs for Indiv	duals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you pay or agree to	pay someone who is no	t an attorney to help you fill out	bankruptcy forms?
■ No			
□ Vas Name of Person	Attach the Rankru	intry Petition Prenarer's Notice D	eclaration, and Signature (Official Form 119)

Fill in this infor	mation to identify your	case:										
Debtor 1	Hardyal R. Jeena											
Debtor 2	First Name	Middle Name	Last Name									
(Spouse if, filing)	First Name	Middle Name	Last Name	-								
United States Ba	ankruptcy Court for the:	RICT OF NEW YORK	_									
Case number												
(if known)				☐ Check if this is an amended filing								
Official Fo	rm 108											
Stateme	nt of Intentio	n for Indiv	viduals Filing Under Cha	pter 7 12/15								
-	ividual filing under cha e claims secured by yo	-	II out this form if:									
_			not expired									
You must file thi whiche	you have leased personal property and the lease has not expired.  You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form											
	f two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.											
_		ale If more space i	s needed, attach a separate sheet to this forn	On the top of any additional pages								
	our name and case nur		s needed, attach a separate sheet to this form	i. On the top of any additional pages,								
Part 1: List Y	our Creditors Who Hav	a Sacurad Claims										
1. For any credit information be		art 1 of Schedule I	D: Creditors Who Have Claims Secured by Pro	perty (Official Form 106D), fill in the								
	editor and the property t	hat is collateral	What do you intend to do with the propert									
			secures a debt?	as exempt on Schedule C?								
-	GM Financial		Surrender the property.	■ No								
name:			Retain the property and redeem it.	□Yes								
Description of	2015 Chevrolet Ca	maro 12000	☐ Retain the property and enter into a Reaffirmation Agreement.	<b>=</b> 1.55								
property	miles		☐ Retain the property and [explain]:									
securing debt:	To be surrendered											
Craditaria 6	Name and an		_	П.,								
	Santander		Surrender the property.	□ No								
name:			Retain the property and redeem it.	■ Yes								
Description of	2012 Chevrolet 35	0 Diesel	Retain the property and enter into a Reaffirmation Agreement.	_ 163								
property	52,000 miles		☐ Retain the property and [explain]:									
securing debt	To be surrendered											
Creditor's S	Synohrony Bonk		ПО									
name:	Synchrony Bank		<ul><li>☐ Surrender the property.</li><li>☐ Retain the property and redeem it.</li></ul>	□ No								
			- Notali the property and redeem it.									

Official Form 108

property

Statement of Intention for Individuals Filing Under Chapter 7

Retain the property and enter into a

Reaffirmation Agreement.

 $\square$  Retain the property and [explain]:

Description of 2013 Suzuki motorcycle

Yes

Debi	tor 1 H	ardyal R. Jeenarine	Case number (if known)
se	ecuring de	ebt:	
Part	2· Lie	t Your Unexpired Personal Property L	2000
For a	ıny unex <sub>l</sub> e informa	pired personal property lease that you ation below. Do not list real estate leas	listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), files. Unexpired leases are leases that are still in effect; the lease period has not yet ended. ase if the trustee does not assume it. 11 U.S.C. § 365(p)(2).
Des	cribe you	ur unexpired personal property leases	Will the lease be assumed?
	sor's name		□ No
	cription of perty:	fleased	☐ Yes
	sor's name		□ No
	cription of perty:	fleased	☐ Yes
	sor's name	<del></del>	□ No
	cription of erty:	rleased	☐ Yes
	sor's name		□ No
	cription of perty:	rleased	☐ Yes
Lessor's name: Description of leased	□ No		
	erty:	rleased	☐ Yes
	sor's name		□ No
	cription of perty:	Teaseu	☐ Yes
	sor's name		□ No
	perty:	Tleaseu	☐ Yes
Part	3: Sig	n Below	
		/ of perjury, I declare that I have indica is subject to an unexpired lease.	ted my intention about any property of my estate that secures a debt and any personal
X		dyal R. Jeenarine	X
	-	I R. Jeenarine e of Debtor 1	Signature of Debtor 2
	Date	October 4, 2016	Date

Official Form 108

Fill in this information to identify your case:			rected in this form a	and in Form
Debtor 1 Hardyal R. Jeenarine	122A-1	Supp:		
Debtor 2 (Spouse, if filing)	□ 1.	There is no presu	ımption of abuse	
United States Bankruptcy Court for the: Eastern District of New York		applies will be m	o determine if a prestade under <i>Chapter</i> cial Form 122A-2).	
Case number (if known)	<u> </u>	The Means Test	does not apply now service but it could	
		. ,	n amended filing	арріу іакої.
Official Form 122A - 1		TIECK II UIIS IS AI	r amended ming	
Chapter 7 Statement of Your Current Mon	thly Incon	na		12/15
- Chapter 7 Statement of Tour Current Mon	itiliy ilicol			12/13
Be as complete and accurate as possible. If two married people are filing together, attach a separate sheet to this form. Include the line number to which the addition case number (if known). If you believe that you are exempted from a presumption qualifying military service, complete and file Statement of Exemption from PresumPart 1:  Calculate Your Current Monthly Income	al information applie of abuse because yo	es. On the top of an	y additional pages, v narily consumer debt	write your name and s or because of
What is your marital and filing status? Check one only.				
☐ Not married. Fill out Column A, lines 2-11.				
☐ Married and your spouse is filing with you. Fill out both Columns	A and B, lines 2-11			
■ Married and your spouse is NOT filing with you. You and your s	pouse are:			
Living in the same household and are not legally separated. F	Fill out both Column	ns A and B. lines 2	-11.	
☐ Living separately or are legally separated. Fill out Column A, lin				vou declare under
penalty of perjury that you and your spouse are legally separated living apart for reasons that do not include evading the Means Tes	under nonbankrup	tcy law that applie	s or that you and yo	
Fill in the average monthly income that you received from all sources, derived 101(10A). For example, if you are filing on September 15, the 6-month period would the 6 months, add the income for all 6 months and divide the total by 6. Fill in the res spouses own the same rental property, put the income from that property in one colu	be March 1 through A oult. Do not include an	ugust 31. If the amo y income amount mo	unt of your monthly incore than once. For exa	come varied during mple, if both
		otor 1	Column B Debtor 2 or non-filing spouse	e
2. Your gross wages, salary, tips, bonuses, overtime, and commissio payroll deductions).	ns (before all \$	9,251.00	\$ 4,477.00	
<ol> <li>Alimony and maintenance payments. Do not include payments from a Column B is filled in.</li> </ol>	a spouse if	0.00	\$ 0.00	<u> </u>
4. All amounts from any source which are regularly paid for househo of you or your dependents, including child support. Include regular from an unmarried partner, members of your household, your dependen and roommates. Include regular contributions from a spouse only if Colu filled in. Do not include payments you listed on line 3.	contributions its, parents,	0.00	\$ 0.00	<u>)</u>
5. Net income from operating a business, profession, or farm				
Debt	tor 1			
Gross receipts (before all deductions) \$ 0.00  Ordinary and necessary operating expenses -\$ 0.00				
Ordinary and necessary operating expenses	Copy here -> \$	0.00	\$ 0.00	)
	- σορ <b>γ</b> ποιο × φ	<u> </u>	Ψ <u> </u>	_
6. Net income from rental and other real property  Debt	tor 1			
Gross receipts (before all deductions) \$ 0.00				
Ordinary and necessary operating expenses -\$ 0.00				
	Copy here -> \$	0.00	\$ 0.00	)
7 Interest dividends and royalties	\$	0.00	\$ 0.00	)

Official Form 122A-1

Case number (if known)

				Column A Debtor 1		Column B Debtor 2 o	or	
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	received was a bene	efit under					
	For you\$	0	.00					
	For your spouse \$		.00					
9.	<b>Pension or retirement income.</b> Do not include any am benefit under the Social Security Act.	ount received that wa	as a	\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Spec Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hum domestic terrorism. If necessary, list other sources on a total below.	ecurity Act or payme nanity, or internationa	nts al or					
	·			\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total		\$	9,251.00	+ _	4,477.00		13,728.00
Part	Determine Whether the Means Test Applies to	You					mcom.	
12.	Calculate your current monthly income for the year.	Follow these steps:						
	12a. Copy your total current monthly income from line 1	1		Сор	y line 11	here=>	\$	13,728.00
	Multiply by 12 (the number of months in a year)						<b>X</b> 1	
	12b. The result is your annual income for this part of the	form				12	b. \$10	64,736.00
13.	Calculate the median family income that applies to y	ou. Follow these ste	eps:					
	Fill in the state in which you live.	NY						
	Fill in the number of people in your household.	4						
	Fill in the median family income for your state and size of To find a list of applicable median income amounts, go of for this form. This list may also be available at the bankr	online using the link	specified	in the separa	ate instruc	tions 13	. \$	88,747.00
14.	How do the lines compare?							
	14a.    Line 12b is less than or equal to line 13. Or Go to Part 3.	n the top of page 1, c	heck box	1, There is i	no presun	nption of abu	se.	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	f page 1, check box 2	2, The pre	esumption of	abuse is	determined l	by Form 12	22A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury	that the information of	on this sta	atement and	in any att	achments is	true and co	orrect.
	X /s/ Hardyal R. Jeenarine				-			
	Hardyal R. Jeenarine Signature of Debtor 1							
	Date October 4, 2016							
	MM / DD / YYYY	1004.0						
	If you checked line 14a, do NOT fill out or file Form							
	If you checked line 14b, fill out Form 122A-2 and fil	e it with this form.						

Hardyal R. Jeenarine

Debtor 1

Fill in this information to identify your case:							
Debtor 1 Hardyal R. Jeenarine							
Debtor 2 (Spouse, if filing)							
United States Bankruptcy Court for the: Eastern District of New York							
Case number(if known)							

Check the appropriate box as directed in lines 40 or 42:
According to the calculations required by this Statement:
■ 1. There is no presumption of abuse.
☐ 2. There is a presumption of abuse.

☐ Check if this is an amended filing

#### Official Form 122A - 2

### **Chapter 7 Means Test Calculation**

04/16

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Copy your total current monthly income. Copy line 11 f	rom Offi	icial Form 122	\-1 here=>	\$	13,728.00
Did you fill out Column B in Part 1 of Form 122A-1?					
☐ No. Fill in \$0 for the total on line 3.					
Yes. Is your spouse Filing with you?					
■ No. Go to line 3.					
☐ Yes. Fill in \$0 for the total on line 3.					
Adjust your current monthly income by subtracting any part of your sp household expenses of you or your dependents. Follow these steps:	ouse's i	ncome not use	ed to pay for the		
On line 11, Column B of Form 122A–1, was any amount of the income you rexpenses of you or your dependents?	eported	for your spouse	NOT regularly use	ed for the I	nousehold
☐ No. Fill in 0 for the total on line 3.					
Yes. Fill in the information below:					
State each purpose for which the income was used	Fil	I in the amount	: you		
For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents.		subtracting fr ur spouse's inc			
Step daughter tuition paid by wife	\$	1,016.00			
Spouse credit card maintenance	\$	350.00			
Spoue automobile payment on her vehicles	\$	1,305.00			
Spouse student loan payment	+ \$ _	1.00			
		2,672.00			
Total.	\$	2,072.00	Copy total here=		2,672.00

Official Form 122A-2

Debtor 1	Hardyal R. Jeenarine	Case number (if known)								
Part 2:	Calculate Your Deductions from Your Income									
to an	nternal Revenue Service (IRS) issues National and L swer the questions in lines 6-15. To find the IRS sta- uctions for this form. This information may also be a	ndards, go online	using the link specified in the separate							
your	act the expense amounts set out in lines 6-15 regardless actual expenses if they are higher than the standards. Done in line 3 and do not deduct any operating expenses the	o not deduct any a	amounts that you subtracted fro your spouse's							
If you	ir expenses differ from month to month, enter the averag	ge expense.								
Wher	never this part of the from refers to you, it means both yo	ou and your spouse	e if Column B of Form 122A-1 is filled in.							
5.	5. The number of people used in determining your deductions from income									
	Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.									
Natio	onal Standards You must use the IRS Nationa	I Standards to answ	wer the questions in lines 6-7.							
	Food, clothing, and other items: Using the number of Standards, fill in the dollar amount for food, clothing, and		d in line 5 and the IRS National \$							
	Out-of-pocket health care allowance: Using the number the dollar amount for out-of-pocket health care. The number people who are 65 or olderbecause older people have higher than this IRS amount, you may deduct the addition	nber of people is sp a higher IRS allowa	olit into two categoriespeople who are under 65 and vance for health care costs. If your actual expenses are							
Peop	ole who are under 65 years of age									
	7a. Out-of-pocket health care allowance per person	\$ 54	<u>i</u>							
	7b. Number of people who are under 65	X4								
	7c. <b>Subtotal.</b> Multiply line 7a by line 7b.	\$ 216.00	Copy here=> \$ 216.00							
Peop	ole who are 65 years of age or older									
	7d. Out-of-pocket health care allowance per person	\$ 130	)							
	7e. Number of people who are 65 or older	x <b>0</b>								
	7f. <b>Subtotal.</b> Multiply line 7d by line 7e.	\$ 0.00	Copy here=> +\$							
	7g. T <b>otal.</b> Add line 7c and line 7f		\$ 216.00 Copy total here=> \$ 216.00							

Debtor	1	Н	ardyal F	R. Jeena	arine						Case numbe	r (if knowr	7)			
Lo	cal	Sta	andards	You mu	ust use th	e IRS Loca	al Standa	rds to ansv	ver the	questions in li	nes 8-15.					
					n the IRS two part		. Trustee	Program I	has divi	ided the IRS	Local Stand	dard for	housi	ing for		
_			_			e and ope e or rent e	_	-								
To	an	swe	er the qu	estions i	in lines 8	-9, use th	e U.S. Tr	ustee Prog	gram ch	nart.						
						link specif ne bankrup			nstruction	ons for this fo	rm.					
8.										the number of expenses				e 5, fill \$		800.00
9.	ł	Hou	sing and	utilities	- Mortga	ge or rent	t expense	es:								
	Ş	9а.						e 5, fill in thenses				\$	; 3	3,034.00		
	Ş	9b.	Total ave	erage mo	onthly pay	ment for a	all mortgaç	ges and oth	ner debt	s secured by	your home.					
			contracti	ually due		ecured cre		nt, add all a ne 60 mont								
			Name of	the cred	itor				Averag	e monthly nt						
			CITI MO	ORTGA	GE, INC				\$	2,873.00						
			M&T B	ank					\$	400.00						
					Total a	iverage m	onthly pay	yment	\$	3,273.00	Copy here=>	-\$		3,273.00	Repeat this amount on line 33a.	
	ç	Эс.	Net mort	gage or r	rent expe	nse.										
								ent) from lin ), enter \$0.			\$		0.00	Copy here=>	\$	0.00
10										ocal Standar ional amoun			correc	t and	\$	0.00
		Exp	plain why	<u>.</u>												
11		Loca	al transp	ortation	expense	s: Check t	the numbe	er of vehicl	es for w	hich you clair	n an owners	hip or o	peratin	ıg expense.		
	[	□ o	. Go to lir	ne 14.												
	[	□ 1	. Go to lir	ne 12.												
	ı	2	or more.	Go to lin	e 12.											

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area.

616.00

Case number (if known)

13.	You n	cle ownership or lease expense: Using the IRS Loca nay not claim the expense if you do not make any loan than two vehicles.								
Ve	Vehicle 1 Describe Vehicle 1: 2015 Chevrolet Camaro 12000 miles To be surrendered									
13a.	Owne	ership or leasing costs using IRS Local Standard			\$	471.00				
13b.		ige monthly payment for all debts secured by Vehicle of tinclude costs for leased vehicles.	1.							
	are co	Iculate the average monthly payment here and on line ontractually due to each secured creditor in the 60 mor uptcy. Then divide by 60.			t					
	ľ	Name of each creditor for Vehicle 1	Average payment	monthly						
	(	GM Financial	\$	405.00						
		Total Average Monthly Payment	\$	405.00	Copy here =>	-\$405	Repeat this amount on line 33b.			
13c.		ehicle 1 ownership or lease expense act line 13b from line 13a. if this amount is less than \$6	0, enter \$0.		\$	66.00	Copy net Vehicle 1 expense here => \$	66.00		
Ve	hicle 2	Describe Vehicle 2: 2012 Chevrolet 350 Di	esel 52,000	miles To	be surrer	ndered				
13d.	Owne	ership or leasing costs using IRS Local Standard			. \$	471.00				
13e.		nge monthly payment for all debts secured by Vehicle 2 d vehicles.	2. Do not incl	ude costs for						
	ľ	Name of each creditor for Vehicle 2	Average payment	monthly						
		Santander	\$\$	416.25						
		Total Average Monthly Payment	\$	416.25	Copy here => -\$ _	416.2	Repeat this amount on line 33c.			
13f.		ehicle 2 ownership or lease expense act line 13e from line 13d. if this amount is less than \$6	0, enter \$0		\$	54.75	Copy net Vehicle 2 expense here => \$	54.75		
14.		c transportation expense: If you claimed 0 vehicles in portation expense allowance regardless of whether you				lards, fill in the	Public \$	0.00		
15.	also c	<b>tional public transportation expense:</b> If you claimed deduct a public transportation expense, you may fill in a laim more than the IRS Local Standard for <i>Public Trans</i>	what you beli					0.00		

Hardyal R. Jeenarine

Debtor 1

Case number (if known)

Oth	Other Necessary Expenses In addition to the expense deductions listed above, you are allow the following IRS categories.	ed your monthly expenses for		
16.	6. <b>Taxes:</b> The total monthly amount that you will actually owe for federal, state and local taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the month your pay for these taxes. However, if you expect to receive a tax refund, you must divide the and subtract that number from the total monthly amount that is withheld to pay for taxes.	nly amount withheld from		
	Do not include real estate, sales, or use taxes.	5	\$	2,631.00
17.	7. <b>Involuntary deductions:</b> The total monthly payroll deductions that your job requires, such as contributions, union dues, and uniform costs.	s retirement		
	Do not include amounts that are not required by your job, such as voluntary 401(k) contribution	ons or payroll savings.	₿	96.00
18.	8. <b>Life Insurance:</b> The total monthly premiums that you pay for your own term life insurance. If filing together, include payments that you make for your spouse's term life insurance. Do not insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life in term.	include premiums for life nsurance other than	\$	0.00
19.	<ol> <li>Court-ordered payments: The total monthly amount that you pay as required by the order or administrative agency, such as spousal or child support payments.</li> </ol>	f a court or		
	Do not include payments on past due obligations for spousal or child support. You will list the	se obligations in line 35.	₿	0.00
20.	20. <b>Education:</b> The total monthly amount that you pay for education that is either required:  as a condition for your job, or			
	■ for your physically or mentally challenged dependent child if no public education is availab	le for similar services.	\$	0.00
21				
۷۱.	<ol> <li>Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare Do not include payments for any elementary or secondary school education.</li> </ol>		\$	0.00
22.	22. Additional health care expenses, excluding insurance costs: The monthly amount that you that is required for the health and welfare of you or your dependents and that is not reimburse by a health savings account. Include only the amount that is more than the total entered in lin	ed by insurance or paid		
	Payments for health insurance or health savings accounts should be listed only in line 25.		₿	0.00
23.	23. Optional telephone and telephone services: The total monthly amount that you pay for telefor you and your dependents, such as pagers, call waiting, caller identification, special long diphone service, to the extent necessary for your health and welfare or that of your dependents income, if it is not reimbursed by your employer.	stance, or business cell		
	Do not include payments for basic home telephone, internet and cell phone service. Do not in expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previous		<b>.</b>	0.00
24.	24. Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23.	\$		5,988.75

Hardyal R. Jeenarine

Debtor 1

Debtor 1	Hardyal R. Jeenarine				Case number (if known)		
_							
Add	litional Expense Deductions	These are additiona	al deduction	ns allowed by the	ne Means Test.		
		Note: Do not includ	e any expe	nse allowances	s listed in lines 6-24.		
25.					ses. The monthly expenses for health ly necessary for yourself, your spouse, or	r	
	Health insurance		\$	693.00			
	Disability insurance		\$	0.00			
	Health savings account		+ \$	0.00			
					7		
	Total		\$	693.00	Copy total here=>	\$	693.00
	Do you actually spend this total	I amount?					
	☐ No. How much do you a	actually spend?					
	Yes	, , , ,	\$				
26.	continue to pay for the reasona	able and necessary ca your immediate family	re and sup who is una	port of an elder ble to pay for s	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may 29A(b).	\$	0.00
27.	Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.						
	By law, the court must keep the	e nature of these expe	enses confid	dential.		\$	0.00
28.	·	·			insurance and operating expenses on		
	If you believe that you have ho 8, then fill in the excess amoun			nan the home e	nergy costs included in expenses on line		
	You must give your case truste amount claimed is reasonable		our actual e	expenses, and	ou must show that the additional	\$	0.00
29.		y for your dependent			e monthly expenses (not more than than 18 years old to attend a private or		
	You must give your case truste claimed is reasonable and nec				ou must explain why the amount 23.		
	* Subject to adjustment on 4/01	I/19, and every 3 year	s after that	for cases begu	in on or after the date of adjustment.	\$	0.00
30.		and clothing allowand	és in the IF	RS National Sta	ctual food and clothing expenses are undards. That amount cannot be more		
	To find a chart showing the mainstructions for this form. This of						
	You must show that the addition	nal amount claimed is	reasonabl	e and necessa	ry.	\$	0.00
31.	Continuing charitable contributions instruments to a religious or ch				ontribute in the form of cash or financial	+\$	0.00
						•	602.00
32.	Add all of the additional expenses Add lines 25 through 31.	ense deductions.				\$	693.00

btor 1	Hardyal R. Jeenarine		ase numl	ber ( <i>if known</i>	)			
Dedu	ctions for Debt Payment							
33. <b>F</b> o	or debts that are secured by an intere	st in property that you own, including homo	e mort	gages, ve	hicle			
To		yment, add all amounts that are contractually o	lue to e	each secu	red			
cr	editor in the 60 months after you file for  Mortgages on your home:	bankruptcy. Then divide by 60.						rage monthly
22-	Canadina Oh hara							ment
33a.						=>	\$	3,273.00
33b.	Loans on your first two vehicles:						\$	405.00
						=>	· —	405.00
3c.						=>	\$_	416.25
3d.	List other secured debts:	Identify was and that account the daha		D		-4		
iame	of each creditor for other secured debt	Identify property that secures the debt		inclu	paymer de taxes ance?			
				-	No			
	Synchrony Bank	2013 Suzuki motorcycle			Yes		\$	128.50
					No			
	TD BANK				Yes		\$	630.00
							Ψ-	
					No		•	
-					Yes	_	<b>⊦</b> \$	
						Cop	y	
33e.	Total average monthly payment. Add lin	nes 33a through 33d	\$	4,8	52.75	total		\$ 4,852.75
		secured by your primary residence, a vehic upport or the support of your dependents?	le,					
-		apport of the support of your dependents:						
	No. Go to line 35.	t pay to a creditor, in addition to the payments						
		sion of your property (called the cure amount).						
Nam	e of the creditor	Identify property that secures the debt		Total cu				Monthly cure amount
-NO	NE-			S		÷ 60 =	\$	
						$\neg$		
						Сор		
		Tota	ıl \$		0.00	total here		\$ 0.0
	o you owe any priority claims such as e past due as of the filing date of you	s a priority tax, child support, or alimony - the sankruptcy case? 11 U.S.C. § 507.	hat					
	No. Go to line 36.							
	I Yes. Fill in the total amount of all of t ongoing priority claims, such as	hese priority claims. Do not include current or those you listed in line 19.						
	Total amount of all past-due p	riority claims	\$		0.00	÷ 60 :	= \$	0.0

ebtor 1	Hard	Iyal R. Jeenarine		Cas	se nu	ımber ( <i>if known</i> )				
Fo	or more	eligible to file a case under Chapter 13? 11 U.S.C. § information, go online using the link for <i>Bankruptcy Bas</i> ns for this form. <i>Bankruptcy Basics</i> may also be availab	sics specified							
	No.	Go to line 37.								
	] Yes.	Fill in the following information.								
		Projected monthly plan payment if you were filing under	r Chapter 13		\$_					
		Current multiplier for your district as stated on the list is Administrative Office of the United States Courts (for d and North Carolina) or by the Executive Office for Unite (for all other districts).	istricts in Alab		X					
		To find a list of district multipliers that includes your district link specified in the separate instructions for this for be available at the bankruptcy clerk's office.					C	py total	ı	
		Average monthly administrative expense if you were fil	ing under Ch	apter 13		\$		re=> (		
		of the deductions for debt payment. es 33e through 36.							\$	4,852.75
Total	Deduc	tions from Income								
38. <b>A</b>	dd all o	of the allowed deductions.								
		ne 24, All of the expenses allowed under IRS	\$	5,988.75	5					
	•	e allowances ne 32, All of the additional expense deductions	Ψ	693.00	_					
	. ,		Ψ		_					
(	ору ііі і	ne 37, All of the deductions for debt payment	+\$	4,852.75	<u> </u>	٦				
		Total deductions	\$	11,534.50	0_	Copy total	here	.=> \$	<b>.</b>	11,534.50
art 3:	Det	ermine Whether There is a Presumption of Abuse				_				
39. <b>C</b> a	alculate	e monthly disposable income for 60 months								
3	39a. Co	py line 4, adjusted current monthly income	\$	11,056.00	0					
3	39b. Co	py line 38, Total deductions	<b>-</b> \$	11,534.50	0					
3		onthly disposable income. 11 U.S.C. § 707(b)(2). btract line 39b from line 39a	\$	-478.50	0	Copy here=>\$		-478	3.50	
F	or the	next 60 months (5 years)					x 60			
3	39d. <b>To</b>	tal. Multiply line 39c by 60	39d.	\$	-28	3,710.00	Copy here=>	\$_	-	28,710.00
40. <b>Fi</b>	ind out	whether there is a presumption of abuse. Check the	box that app	ies:			J			
	The I	ine 39d is less than \$7,700*. On the top of page 1 of the	is form, chec	k box 1, <i>Th</i>	ere	is no presui	mption of	abuse. (	Go to F	Part 5.
		ine 39d is more than \$12,850*. On the top of page 1 or 4 if you claim special circumstances. Go to Part 5.	f this form, ch	eck box 2,	The	re is a presu	umption o	f abuse.	. You n	nay fill out
	] The I	ine 39d is at least \$7,700*, but not more than \$12,850	<b>0*.</b> Go to line	41.						
		to adjustment on 4/01/19, and every 3 years after that for			the (	date of adiu	stment			

Debtor 1	Hard	dyal R. Jeenarine	Case number (if known)
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.	out  n  \$  X .25
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	
25	% of y	ne whether the income you have left over after subtracting all allowed d vour unsecured, nonpriority debt.  e box that applies:	eductions is enough to pay
		<b>39d is less than line 41b.</b> On the top of page 1 of this form, check box 1, <i>Th</i> p Part 5.	here is no presumption of abuse.
		<b>39d is equal to or more than line 41b.</b> On the top of page 1 of this form, chamption of abuse. You may fill out Part 4 if you claim special circumstances.	
Part 4:	Giv	ve Details About Special Circumstances	
		we any special circumstances that justify additional expenses or adjustres alternative? 11 U.S.C. § $707(b)(2)(B)$ .	ments of current monthly income for which there is no
	lo. Go	o to Part 5.	
□ Y		I in the following information. All figures should reflect your average monthly om. You may include expenses you listed in line 25.	expense or income adjustment for each
	ne	ou must give a detailed explanation of the special circumstances that make th cessary and reasonable. You must also give your case trustee documentatio ljustments.	
	G	Sive a detailed explanation of the special circumstances	Average monthly expense or income adjustment
	_		\$
	_		\$
			\$
			\$
Part 5:	Sic	gn Below	
urt or		gning here, I declare under penalty of perjury that the information on this stat	ement and in any attachments is true and correct.
	-	/ Hardyal R. Jeenarine	·
	На	ardyal R. Jeenarine gnature of Debtor 1	
Da		ctober 4, 2016	
		M/DD/YYYY	

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Eastern District of New York

Debtor(s) Chapter 7  DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)  1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:  For legal services, I have agreed to accept \$ 2200.00  Prior to the filing of this statement I have received \$ 1500.00  Balance Due \$ 700.00  2. \$ 335 of the filing fee has been paid.  3. The source of the compensation paid to me was:  ☑ Debtor □ Other (specify):  4. The source of compensation to be paid to me is:  ☑ Debtor □ Other (specify):  5. ☑ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm □ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm □ the approach of the above-disclosed fee agreed to render legal service for all aspects of the bankruptcy case, including: conferences with client, preparation and review of bankruptcy petition, including execution of petition, correspondence to client and attendance at initial meeting of creditors (one appearance)  7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability or discharge actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding and review and execution of reaffirmation agreements.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.  S/Kenneth Halpern  Konneth Halpern, Esq. Signature of Automey  Kenneth Halpern, Esq. Signature of Automey  Kenneth Halpern, Esq. Sign	In re	e Hardyal R. Jeenarine		Case No.	
1. Pursuant to 11 U. S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:  For legal services, I have agreed to accept  Prior to the filing of this statement I have received  \$ 2200.00  Prior to the filing fee has been paid.  3. The source of the compensation paid to me was:  Debtor Other (specify):  4. The source of compensation to be paid to me is:  Debtor Other (specify):  5. ✓ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm that the people sharing in the compensation is attached.  66. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: conferences with client, preparation and review of bankruptcy petition, including execution of petition, correspondence to client and attendance at initial meeting of creditors (one appearance)  7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability or discharge actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding and review and execution of reaffirmation agreements.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.  Signature of Atomey.  Kenneth Halpern, Esq.  Signature of Atomey.  Kenneth Halpern, Esq.  Signature of Atomey.  Kenneth Halpern (Esq.)  Signature of Atomey.  Kenneth Halpern (Esq.)  Sig			Debtor(s)	Chapter	7
compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:  For legal services, I have agreed to accept	1				
Prior to the filing of this statement I have received \$ 1500.00  Balance Due \$ 700.00  \$ 700.00  2. \$ 335 of the filing fee has been paid.  3. The source of the compensation paid to me was:     Debtor   Other (specify):  4. The source of compensation to be paid to me is:    Debtor   Other (specify):  5.   I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm   I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.  66. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: conferences with client, preparation and review of bankruptcy petition, including execution of petition, correspondence to client and attendance at initial meeting of creditors (one appearance)  7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability or discharge actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding and review and execution of reaffirmation agreements.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.    10/4/16		compensation paid to me within one year before the	filing of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
Balance Due \$ 700.00  2. \$ 335 of the filing fee has been paid.  3. The source of the compensation paid to me was:		<i>c</i> , <i>c</i> ,			2200.00
2. \$ 335 of the filing fee has been paid. 3. The source of the compensation paid to me was:  ☑ Debtor □ Other (specify): 4. The source of compensation to be paid to me is:  ☑ Debtor □ Other (specify): 5. ☑ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm □ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm □ In the agreement, together with a list of the names of the people sharing in the compensation is attached. 66. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: conferences with client, preparation and review of bankruptcy petition, including execution of petition, correspondence to client and attendance at initial meeting of creditors (one appearance)  77. By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability or discharge actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding and review and execution of reaffirmation agreements.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.  S/Kenneth Halpern  Kenneth Halpern, Esq. Signature of Attorney Kenneth Halpern, Esq. Gefo Old Country Road, Suite 810 Garden City, NY 11530 (516) 222-1199 Fax: (516) 228-6672 kjhalpern @gmail.com		Prior to the filing of this statement I have received	ved	\$	1500.00
3. The source of the compensation paid to me was:     Debtor		Balance Due		\$	700.00
<ul> <li>✓ Debtor</li></ul>	2.	\$335 of the filing fee has been paid.			
4. The source of compensation to be paid to me is:  ☑ Debtor ☐ Other (specify):  5. ☑ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.  66. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: conferences with client, preparation and review of bankruptcy petition, including execution of petition, correspondence to client and attendance at initial meeting of creditors (one appearance)  7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability or discharge actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding and review and execution of reaffirmation agreements.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.  S/Kenneth Halpern  Kenneth Halpern, Esq. Signature of Attorney	3.	The source of the compensation paid to me was:			
Debtor Other (specify):  1 have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.  66. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: conferences with client, preparation and review of bankruptcy petition, including execution of petition, correspondence to client and attendance at initial meeting of creditors (one appearance)  7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability or discharge actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding and review and execution of reaffirmation agreements.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.  S/Kenneth Halpern  Kenneth Halpern, Esq. Signature of Attorney  Kenneth Halpern, Esq. Garden City, NY 11530  Garden City, NY 11530  (516) 222-1199 Fax: (516) 228-6672  khalpern@gmail.com		✓ Debtor			
Debtor Other (specify):  1 have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.  66. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: conferences with client, preparation and review of bankruptcy petition, including execution of petition, correspondence to client and attendance at initial meeting of creditors (one appearance)  7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability or discharge actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding and review and execution of reaffirmation agreements.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.  S/Kenneth Halpern  Kenneth Halpern, Esq. Signature of Attorney  Kenneth Halpern, Esq. Garden City, NY 11530  Garden City, NY 11530  (516) 222-1199 Fax: (516) 228-6672  khalpern@gmail.com	4.	The source of compensation to be paid to me is:			
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.  66. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: conferences with client, preparation and review of bankruptcy petition, including execution of petition, correspondence to client and attendance at initial meeting of creditors (one appearance)  77. By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability or discharge actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding and review and execution of reaffirmation agreements.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.  S/Kenneth Halpern  Kenneth Halpern, Esq. Signature of Attorney Kenneth Halpern, Esq. 666 Old Country Road, Suite 810 Garden City, NY 11530 (516) 222-1199 Fax: (516) 228-6672 kjhalpern@gmail.com					
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client, preparation and review of bankruptcy petition, including execution of petition, correspondence to client and attendance at initial meeting of creditors (one appearance)  7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability or discharge actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding and review and execution of reaffirmation agreements.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.  S/Kenneth Halpern  Kenneth Halpern, Esq. Signature of Attorney Kenneth Halpern, Esq. 666 Old Country Road, Suite 810 Garden City, NY 11530 (516) 222-1199 Fax: (516) 228-6672 kjhalpern@gmail.com		I have agreed to share the above-disclosed comp copy of the agreement, together with a list of the	pensation with a person or persons we names of the people sharing in the	who are not members compensation is atta	or associates of my law firm. A ached.
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I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.    10/4/16	.7.	Representation of the debtors in any	dischargeability or discharge	actions, judicial	
this bankruptcy proceeding.    10/4/16			CERTIFICATION		
Kenneth Halpern, Esq.  Signature of Attorney  Kenneth Halpern, Esq.  666 Old Country Road, Suite 810  Garden City, NY 11530  (516) 222-1199 Fax: (516) 228-6672  kjhalpern@gmail.com	this l	I certify that the foregoing is a complete statement obankruptcy proceeding.	of any agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
Kenneth Halpern, Esq.  Signature of Attorney  Kenneth Halpern, Esq.  666 Old Country Road, Suite 810  Garden City, NY 11530  (516) 222-1199 Fax: (516) 228-6672  kjhalpern@gmail.com	1	0/4/16	S/Kenneth Halpern		
Kenneth Halpern, Esq. 666 Old Country Road, Suite 810 Garden City, NY 11530 (516) 222-1199 Fax: (516) 228-6672 kjhalpern@gmail.com			Kenneth Halpern		
666 Old Country Road, Suite 810 Garden City, NY 11530 (516) 222-1199 Fax: (516) 228-6672 kjhalpern@gmail.com					
(516) 222-1199 Fax: (516) 228-6672 kjhalpern@gmail.com			666 Old Country	Road, Suite 810	
kjhalpern@gmail.com					
Name of law firm					
	L		Name of law firm		

### **United States Bankruptcy Court Eastern District of New York**

In re	Hardyal R. Jeenarine		Case No.	
		Debtor(s)	Chapter	7

#### **VERIFICATION OF CREDITOR MATRIX**

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Garden City, NY 11530 (516) 222-1199 Fax: (516) 228-6672

USBC-44 Rev. 9/17/98

AMAZON.COM YNCHRONY BANK P O BOX 960013 ORLANDO, FL 32895

AMERICAN CORADIUS INTERNATIONAL 2420 SWEET HOME RD SE 150 Buffalo, NY 14228

AT&T MOBILITY P O BOX 537104 Atlanta, GA 30353

BANKAMERICARD P O BOX 15019 Wilmington, DE 19886

BJ'S P O BOX 659834 SAN ANTONIO, TX 78265

CAPITAL ONE
P O BOX 70885
Charlotte, NC 28272

CAPITAL ONE P O BOX 70885 Charlotte, NC 28272

CAPITAL ONE BANK USA NA 4851 COX ROAD Glen Allen, VA 23060

CAPITAL ONE RETAIL P O BOX 71106 Charlotte, NC 28272

CITI MORTGAGE, INC BANKRUPTCY SERVICE CENTER P O BOX 6030 Sioux Falls, SD 57117 CITIMORTGAGE C/O DAVIDSON FINK LLP 28 E MAIN STREET SUITE 1700 Rochester, NY 14614

FIRST PREMIER BANK P O BOX 5529 Sioux Falls, SD 57117

GE MONEY BANK 332 MINNESOTA STREET MAIL STOP MSF613D Saint Paul, MN 55101

GE MONEY BANK/GEMB P O BOX 981064 El Paso, TX 79998

GM Financial P O Box 78143 Phoenix, AZ 85062

HOME DEPOT PROCESSING CENTER Des Moines, IA 50364-0500

HUDSON AND KEYSE, LLC A/O WASHINGTON MUTUAL. BANK 382 BLACKBROOK ROAD Painesville, OH 44077

KOHL'S CREDIT P O BOX 3043 Milwaukee, WI 53201

LOWE'S P O BOX 530914 Atlanta, GA 30353

M&T Bank P O BOX 62182 Baltimore, MD 21264 MACY'S 9111 Duke Blvd Mason, OH 45040

MACY'S CREDIT & CONSUMER P O BOX 8113 Mason, OH 45040

MANUFCTURERS TRADER TRUST COMPANY ONE M&T PLAZA NY 14200

MERS FOR CORINTHIAN MORTGAGE CORP SOUTHBANC MORTGAGE P O BOX 2026 Flint, MI 48501

NY RISING 500 BI-COUNTY BLVD STE 300 Farmingdale, NY 11735

Santander

SOUTH NASSAU COMMUNITIES HOSPITAL P O BOX 5635 Hicksville, NY 11802

Synchrony Bank P O Box 530912 Atlanta, GA 30353

TARGET
P O BOX 660170
Dallas, TX 75266

TD BANK 1701 RT 70 EAST Cherry Hill, NJ 08034

WELLS FARGO FINANCIAL BNK 3201 NORTH 4TH AVENUE Sioux Falls, SD 57104

## UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

# STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

<b>DEBTOR(S):</b>	Hardyal R. Jeenarine	CASE NO.:.
		(b), the debtor (or any other petitioner) hereby makes the following disclosure nowledge, information and belief:
was pending at any spouses or ex-spous partnership and one have, or within 180	time within eight years before theses; (iii) are affiliates, as defined or more of its general partners;	purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a (vi) are partnerships which share one or more common general partners; or (vii) either of the Related Cases had, an interest in property that was or is included in the .]
■ NO RELATED	CASE IS PENDING OR HAS I	BEEN PENDING AT ANY TIME.
☐ THE FOLLOW	ING RELATED CASE(S) IS PE	ENDING OR HAS BEEN PENDING:
1. CASE NO.:	JUDGE: DISTRICT	T/DIVISION:
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:
CURRENT STAT	US OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (A	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE OF RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRICT	T/DIVISION:
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:
CURRENT STAT	US OF RELATED CASE:	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (A	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE OF RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRICT	T/DIVISION:
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE:	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
	Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer	to NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULI SCHEDULE "A" OF RELATED CASE:	E "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
	s who have had prior cases dismissed within the preceding 180 days may not ired to file a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S AT	TTORNEY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New Y	York (Y/N):Y
CERTIFICATION (to be signed by pro se debtor/petition I certify under penalty of perjury that the within bankrupt as indicated elsewhere on this form.  /s/ Kenneth Halpern, Esq.	cy case is not related to any case now pending or pending at any time, except
Kenneth Halpern, Esq. Signature of Debtor's Attorney Kenneth Halpern, Esq. 666 Old Country Road, Suite 810	Signature of Pro Se Debtor/Petitioner
Garden City, NY 11530 (516) 222-1199 Fax:(516) 228-6672	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17 Rev.8/11/2009